



NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

HOBBS OFFICE OCC
APR 27 PM 3:23

COMPANY Gulf Oil Corporation - Box 2167, Hobbs, New Mexico
(Address)

LEASE Chaves State WELL NO. 1 UNIT M S 30 T 15 S R 31 E

DATE WORK PERFORMED 4-23, 24-56 POOL Caprock-Queen

This is a Report of: (Check appropriate block) Results of Test of Casing Shut-off
 Beginning Drilling Operations Remedial Work
 Plugging Other _____

Detailed account of work done, nature and quantity of materials used and results obtained.

Ran 90 joints (2893') 4-1/2" OD 9.50# Gr H-40 SS casing. Set and cemented at 2901' with 75 sacks Regular Neat cement. Plug at 2866'. Maximum Pressure 450#. Job completed 11:45PM 4-23-56.

After waiting over 30 hours, tested 4-1/2" casing with 1000# for 30 minutes. There was no drop in pressure. Drilled cement plug from 2866-2901'. Tested below casing shoe with 800# for 30 minutes. No drop in pressure.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. _____ TD _____ PBD _____ Prod. Int. _____ Compl Date _____
Tbng. Dia _____ Tbng Depth _____ Oil String Dia _____ Oil String Depth _____
Perf Interval (s) _____
Open Hole Interval _____ Producing Formation (s) _____

RESULTS OF WORKOVER:

| | BEFORE | AFTER |
|---------------------------------|--------|-------|
| Date of Test | _____ | _____ |
| Oil Production, bbls. per day | _____ | _____ |
| Gas Production, Mcf per day | _____ | _____ |
| Water Production, bbls. per day | _____ | _____ |
| Gas-Oil Ratio, cu. ft. per bbl. | _____ | _____ |
| Gas Well Potential, Mcf per day | _____ | _____ |

Witnessed by _____ (Company)

OIL CONSERVATION COMMISSION

I hereby certify that the information given above is true and complete to the best of my knowledge.

Name [Signature]
Title _____
Date _____

Name [Signature]
Position Asst Area Supt. of Prod.
Company Gulf Oil Corporation