

## NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

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

Name of Company <b>TEXACO Inc.</b>		Address <b>P. O. Box 352, Midland, Texas</b>				
Lease <b>State of N.M. "AN"</b>	Well No. <b>5</b>	Unit Letter <b>I</b>	Section <b>22</b>	Township <b>14-S</b>	Range <b>33-E</b>	
Date Work Performed <b>May 31, 1960</b>	Pool <b>Saunders</b>			County <b>Lea</b>		

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations    ☐ Casing Test and Cement Job    ☐ Other (Explain):  
☐ Plugging    ☒ Remedial Work

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

Ran 2-7/8" Drill pipe with over shot and engage 5-1/2" O.D. casing which was at 1949'. Collar found split. Cut casing at 1970' and pulled 5-1/2" O.D. casing. Back off casing at 3772' and pulled. Ran 3776' of 5-1/2" O.D. casing and screwed into 5-1/2" O.D. casing at 3772'. Fished out 5,000' of 2" O.D. tubing. Ran combination string of 2" and 2-1/2" tubing to 9938'. Install pump equipment, test, and placed well on production.

Witnessed by	Position	Company
--------------	----------	---------

## FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

## ORIGINAL WELL DATA

D F Elev. <b>4213'</b>	TD <b>10,000</b>	PBTD <b>9,998'</b>	Producing Interval <b>9741' to 9940'</b>	Completion Date <b>11-19-58</b>
Tubing Diameter <b>2"</b>	Tubing Depth <b>9960'</b>	Oil String Diameter <b>5-1/2"</b>	Oil String Depth <b>9987'</b>	

Perforated Interval(s)  
**9741' to 9746', 9816' to 9824', 9890' to 9896', 9930' to 9940'**Open Hole Interval  
**None**    Producing Formation(s)  
**9741' to 9940'**

## RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover	<b>2-1-60</b>	<b>33</b>	<b>24</b>	<b>28</b>	<b>721</b>	<b>--</b>
After Workover	<b>5-31-60</b>	<b>40</b>	<b>13</b>	<b>20</b>	<b>327</b>	<b>--</b>

OIL CONSERVATION COMMISSION

Approved by

Title

Date

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

Name

Position

**Assistant District Superintendent**

Company

**TEXACO Inc.**