

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)  
1000 SEP 1 1960 11 25

COMPANY TENNESSEE GAS TRANSMISSION COMPANY Box 307, Hobbs, New Mexico  
(Address)

LEASE State WELL NO. 1 UNIT F S 27 T 12-S R 34-E  
DATE WORK PERFORMED August 16, 1960 POOL Undesignated

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.

Set and cemented 8-5/8", 24#, J-55, Sals Casing at 2025' with 725 Sx pos 5, 2% gel, and 200 Sx reg, 18# salt per sack. Circ. approx. 170 Sx. Plg dn 1:45 A.M. 8-18-60. Press test casing to 1000# for 30 minutes after WOC 24 hours. Held OK.

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

Name [Signature]  
Title Engineer District 1  
Date SEP 1 1960

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

Name [Signature] D. W. Coffey  
Position District Production Superintendent  
Company Tennessee Gas Transmission Company

RECEIVED  
1950