

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Sinclair Oil & Gas Company  
(Address)

LEASE Seaman Unit WELL NO. 5 UNIT 0 S 24 T 16S R 33E

DATE WORK PERFORMED \_\_\_\_\_ POOL Kennitz-Wolfcamp

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.

12-26-57 Spudded 6:00 P.M. Warren-Bradshaw  
12-27-57 Set 13-3/8" OD SWSJ Casing @ 325' w/410 sacks regular cement. Cement circulated to surface.  
12-28-57 Tested 13-3/8" OD casing w/500# pump press. 30 min. before & after drilling cement plug. No decrease 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

Name E. H. [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name [Signature]  
Position Dist. Supt.  
Company Sinclair Oil & Gas Company

Orig & Jcc: OCC  
cc: FHR, HFD, File

PARTNERS: cc direct: Cities Service - Bartlesville;  
Cities Service - Hobbs; Shelly Oil Co.; Shell Oil Co.