

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

DISTRICT OFFICE 000  
SEP 6 PM 2:53

COMPANY CABOT CARBON COMPANY, P.O. BOX 2095, Midland, Texas  
(Address)

LEASE New Mexico State "A" WELL NO. 1 UNIT E S 33 T 15-S R 35-E  
DATE WORK PERFORMED 8/28/55 POOL Wildcat

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

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

1. Set 2970' of 32#, and 1730' of 24# - all 8-5/8" OD intermediate casing. Total of 4700' of 8-5/8" OD casing set at 4702', Ground Measurement. Cemented with 2700 sxs. of cement. Cement circulated to surface.
2. Tested casing with 1000 psig for 30 minutes. O.K.

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 C. M. Lieder  
Title \_\_\_\_\_  
Date \_\_\_\_\_

I hereby certify that the information given above is true and complete to the best of my knowledge.  
Name French Board  
Position Production Superintendent & Engineer  
Company Cabot Carbon Company