

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY The Pure Oil Company Box 1777 - Hobbs, New Mexico  
(Address)

LEASE State Lea "A" WELL NO. 2 UNIT C S 10 T 16-S R 35-E  
DATE WORK PERFORMED \_\_\_\_\_ POOL Townsend (Wolfcamp)

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

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

It is requested that the above captioned well be removed from O. C. C. proration schedule. Average daily production has declined to less than one barrel per day.

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 \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Name H. G. Teague H. G. Teague  
Position District Superintendent  
Company The Pure Oil Company