

NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS
(Submit to appropriate District Office as per Commission Rule 1106)

COMPANY Cities Service Oil Company, Box 97, Hobbs, New Mexico
(Address)

LEASE State AP WELL NO. 1 UNIT J S 16 T 15 R 36

DATE WORK PERFORMED Aug. 12 to 20, 1957 POOL Undesignated
Inclusive

This is a Report of: (Check appropriate block)

<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Results of Test of Casing Shut-off
<input type="checkbox"/> Plugging	<input type="checkbox"/> Remedial Work
	<input checked="" type="checkbox"/> Other <u>Plug back, perf., acidize</u>

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

This well was drilled to a total depth of 13,657 and plugged back to 13,600 in the Devonian. Water encroachment made this well non-commercial. It was plugged back to 10,413' and the 5 1/2" casing was perforated from 10,290' to 10,310' in the Wolfcamp. The well was acidized with 500 gallons mud acid and swabbed to recover load. Acidized with 5000 gallons acid, swabbed and pumped to recover load.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. 3914 TD 13,657 PBD * Prod. Int. 13550 to TD Compl Date 4-10-55

Tbng. Dia 2" Tbng Depth 13434.37 Oil String Dia 5 1/2" Oil String Depth 13550

Perf Interval (s) Open hole completion

Open Hole Interval 13,550 to TD Producing Formation (s) Devonian

* Please note this well was plugged back to 13,600 after completion.

RESULTS OF WORKOVER:

	BEFORE	AFTER
Date of Test	Devonian	Wolfcamp
	<u>6-19-57</u>	<u>8-25-57</u>
Oil Production, bbls. per day	<u>12</u>	<u>90.91</u>
Gas Production, Mcf per day	<u>TSTM</u>	<u>106</u>
Water Production, bbls. per day	<u>280.5</u>	<u>44.19</u>
Gas-Oil Ratio, cu. ft. per bbl.	<u>TSTM</u>	<u>1166</u>
Gas Well Potential, Mcf per day	<u>-</u>	<u>-</u>

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 [Signature]
Title [Signature]
Date [Signature]

Name [Signature]
Position Dist. Supt.
Company Cities Service Oil Co.