

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLSOFFICE OCC

Submit this report in TRIPLICA pleted. It should be signed and filed a result of well repair, and other impe- instructions in the Rules and Regular	s a report on Beginning Dri ortant operations, even thou	Iling Operations, Results of	f the Af Markor short offile	estil of mineral of wall	
	Indicate Nature	of Report by Checking B	elow		
REPORT ON BEGINNING DRILLING OPERATIONS	REPORT ON OF CASING	RESULT OF TEST SHUT-OFF	REPORT ON REPAIRING WEL	L	
REPORT ON RESULT OF PLUGGING WELL	REPORT ON OPERATION	RECOMPLETION	REPORT ON (Other) Perfor	ation & Acid \$	
	H	ay 1, 1954	Hobbs, New	Mexico	
		(Date)		(Place)	
Following is a report on the wo					
Sincleir Oil & Gas Com (Company or	Dany Operator)	T	D. Pape		
A. W. Thompson Inc.		Well No 9	The state of the s	W 1/2 of Sec. 36	
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T. 14. S , R. 37 E , NMPM.,	Dervor	Pool,	Les	County.	
ED - 12644 - set 7" OD convey which indicated to set 72 Hours, tested BTD 12622 - perferated than 12602° of 2 1/2" UE 155 Bbls. of oil and 97 leidised W/l,000 gallens Bbls. per minute. Swald Bbl. acid and 405 Bbls.	ALLED ACCOUNT OF W asing @ 12643 and op of cement behin W/1500# for 30 mi 7" OD easing with tub ing. Swabbed 1 Bels. of load wate of Mud acid. May bed 1 Hr. 30 Min. 6. of new eil in	comented with 750 at 7" casing @ 790 inutes before and 4 - 1/2" jet shot ilg Hrs., flewed tor in 11 Hrs. & Press. 300#, Má., well started fl. 10 hours. flewed	o sacks of cement. of from surface. I after drilling plants per foot from the property of th	plug. No decrease 12514 to 12600. Plowed in tank Injection rate	
775#, Last 4 hours flowed Witnessed by	mer Sir	clair Oil & Gas G	lo. Fo	reman	
(waine)		(Company)	(T itl	e)	
Approved: OIL CONSERVATION	COMMISSION	I hereby certify that to the best of my k	t the information given abonowledge.	we is true and complete	
(Name	voor-	Name			
Call & Ocis Inspector Vini			Position Dist.Clerk		
(Title)			Representing Sinclair Oil & Gas Co. Address Bex 1927 Hobbs N. N.		
,	(Date)	Address	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・		