

3 - OCC  
1 - Sinclair Oil & Gas  
P. O. Box 1470  
Midland, Texas  
1 - File

Form C-103  
(Revised 3-55)

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106). 71 3 01

COMPANY Tidewater Oil Company Box 547 Hobbs, New Mexico  
(Address)

LEASE State "P" WELL NO. 2-D UNIT L S 32 T 16 R 37  
DATE WORK PERFORMED See Below POOL Livingston Abo

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.

3-19-58 Pulled tubing & packer & cleaned out to PBD 8439' w/ sand pump.  
3-21-58 Plugged back to 8410' w/ Calseal & Hydromite.  
3-23-58 Set 2" tubing at 8395' & packer @ 8230'.  
3-26-58 Swabbed well in. Necessary to swab well intermittently.  
5-2-58 Replaced 2" tubing w/ 2-1/2", set 2-1/2" tubing @ 8402' w/ seating nipple  
@ 7988' & Baker compensating tubing nipple @ 7989'.  
5-3-58 Ran rods & pump in hole and put well to pumping.

NOTE: Prior to plugback, well was producing excessive water, requiring two swab jobs per week to keep well flowing. Plugback was not entirely satisfactory, therefore pumping equipment was installed.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. 3822 TD 8462 PBD 8445 Prod. Int. 8380-8435 Compl Date 12-4-52  
Tbng. Dia 2" Tbng Depth 8436 Oil String Dia 7" Oil String Depth 8444  
Perf Interval (s) 8380-8435, 200 1/2" McCullough Tool Co. bullet shots  
Open Hole Interval \_\_\_\_\_ Producing Formation (s) Abo

RESULTS OF WORKOVER:

	BEFORE	AFTER
Date of Test	<u>3-1-58</u>	<u>5-8-58</u>
Oil Production, bbls. per day	<u>111</u>	<u>153</u>
Gas Production, Mcf per day	<u>85</u>	<u>59</u>
Water Production, bbls. per day	<u>45</u>	<u>90</u>
Gas-Oil Ratio, cu. ft. per bbl.	<u>766</u>	<u>386</u>
Gas Well Potential, Mcf per day	_____	_____
Witnessed by _____	_____	_____

(Company)

OIL CONSERVATION COMMISSION

Name [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name M. P. SHACKELFORD  
Position Area Supt.  
Company Tidewater Oil Company