

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 2107, Fort Worth 1, Texas  
(Address)

LEASE State-land WELL NO. 1 UNIT P S 22 T 18-S R 35-E  
DATE WORK PERFORMED - POOL Wildcat

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

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

Per C-101, Notice of Intention to Drill, under Casing Program, the following was shown for the intermediate string of casing:

8-5/8" OD casing to be set at 4600'

This should be corrected to read:

8-5/8" OD casing to be set at 3750'

There is no change contemplated in the casing program other than the amount of pipe to be set for the intermediate string.

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 _____		

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.

Name [Signature]  
Position Asst. Division Manager  
Company The Pure Oil Company