

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, result of well repair, and other important operations, even though the work was witnessed by an agent of the Commission. See additional instructions in the Rules and Regulations of the Commission.

Indicate Nature of Report by Checking Below

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other)	

Sandfrac

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April 22, 1955

Robbs, New Mexico

Following is a report on the work done and the results obtained under the heading noted above at the

Tide Water Associated Oil Company  
(Company or Operator)

State "NM"  
(Lease)

J. E. McAdams

(Contractor)

Well No. 1 in the SE 1/4 NE 1/4 of Sec. 14

T. 18, R. 37, NMPM, Bowers Pool, Lea County.

The Dates of this work were as follows: 4-4-55 thru 4-14-55

Notice of intention to do the work (was) (was not) submitted on Form C-102 on \_\_\_\_\_, 19\_\_\_\_,  
(Cross out incorrect words)

and approval of the proposed plan (was) (was not) obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

4-4-55 Hot oiled tubing.  
4-5-55 Pulled tubing & prepared well for sandfracing.  
4-6-55 Sandfraced w/10,000 gallons of lease crude & 10,000# of sand. Flushed w/ 110 BO. Injection rate - 23.2 BPM down casing. Injection pressure 2500 psi.  
4-8-55 Ran tubing, swabbed & flowed 61 bbls.  
4-14-55 Installed portable, pumping unit & put on pump.  
4-18-55 Made 36.51 BOPD w/2% water after load oil was recovered. Increased from 2 BOPD to 36.51 BOPD from R.W.

Witnessed by L. W. Hagan (Name) Tide Water Associated Oil Company (Company) Field Foreman (Title)

Approved: OIL CONSERVATION COMMISSION

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

Name: E. P. Shackelford

Position: Area Superintendent

Representing: Tide Water Associated Oil Company

Address: Box 547 Hobbs, N.M.

(Title)

(Date)