

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	X	REPORT ON RECOMPLETION OPERATION		REPORT ON (Other)	

November 20, 1952

(Date)

Hobbs, New Mexico

(Place)

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

C. H. Sweet

(Company or Operator)

Grimes

(Lease)

Lea County Casing Pullers

(Contractor)

Well No. **1** in the **NE** $\frac{1}{4}$ **SE** $\frac{1}{4}$ of Sec. **20**

T. **18S**, R. **38E**, NPM, **Hobbs** Pool, **Lea** County.

The Dates of this work were as follows: **November 19th and 20th**

Notice of intention to do the work (was) (was not) submitted on Form C-102 on **May 12**, 19**52**
 (Cross out incorrect words)

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

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

This well has been plugged and abandoned using the following procedure:

20 sack cement plug was set at the bottom of the 7" casing at 4005'. The 7" collapsed at 2200'. A 20 sack cement plug was set at 2200'. Shot 7" off at 700' and recovered 700' of 7" casing. Set a 20 sack cement plug where the casing was shot off. A 10 sack cement plug was set at the bottom of the surface pipe at 250'. A 4" marker was placed at the abandoned location.

Witnessed by..... (Name) (Company) (Title)

Approved: **OIL CONSERVATION COMMISSION**

Ray Yachway
 (Name)

(Title)

(Date)

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

Name.....

Position.....

Representing.....

Address.....

Operator

C. H. Sweet

Box 1115, Hobbs, New Mexico