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NEW MEXICO OIL CONSERVATION COMMISSION FORM C-103

LAND OFFICE	MISCELLANEOUS REPORTS ON WELLS										
PROPATION OF	ıcı	(Submit to	appropriate Di	strict	Office	as per Comm	nission Rela	THOS?	63		
Name of Company TEXACO Inc. Address P. O. Box 728 - Hobbs, New Mexico											
Lease State o	f New Mexico "	Vii Well	3.7	etter	Section 34	Township	17 - S	Range	34 - E		
Date Work Pe	rformed	Pool Vacuum				County	Lea				
December 26, 1963 Vacuum THIS IS A REPORT OF: (Check appropriate block)											
Beginning Drilling Operations Casing Test and Cement Job Other (Explain):											
Plugging X Remedial Work											
Detailed account of work done, nature and quantity of materials used, and results obtained.											
The following remedial work has been accomplished on subject well as per NMOCC approval dated November 15, 1963: After injecting a mixture of 55 gallons of cheplex in 500 gallons of 5% hydrochloric											
After injecting a mixture of 55 gallons of chepter in 300 gallons out open hole to acid into the tubing casing annulus, pull rods and tubing. Clean out open hole to total depth. Frac the open hole from 4171 to 4700 with 30,000 gallons refined oil, 30,000 lbs sand in 3 stages with 1000 lbs. flaked napthalene between stages, rate of 17.1 BPM.											
Recover load oil, test, return well to production.											
Witnessed by J. S. Webber Production foreman Company TEXACO Inc.											
L. S. Webber Production Forement Fill IN BELOW FOR REMEDIAL WORK REPORTS ONLY											
			ORIGINAL W								
D F Elev.	Elev. TD 47001 NONE			4171' to 4700' April 1					ril 12, 1940		
Tubing Diam	2 7/8"	Tubing Depth	001	ii Stri 5 1	ng Diame	eter	Oil Stri	ng Dept 171	h '		
Perforated lo	terval(s)	<u> </u>	<u>., </u>								
Open Hole In	NONE		IP	roduci	ng Form	ation(s)					
Open Hote In	4171 to					Graybur	g				
			RESULTS OF	WORI							
Test	Date of Test	Oil Production BPD	Gas Producti MCFPD	ion		Production BPD	GOR Cubic feet	ВЫ	Gas Well Potential MCFPD		
Before Workover	11-1-63	26	-		NONE						
After Workover	12-26-63	60	59.4		NONE		991		- **		
	OIL CONSERVATION COMMISSION I hereby certify that the information given above is true and complete to the best of my knowledge.								e is true and complete		
Approved by				Name Shawing							
Position Assistant						t Distria	t Superin				
Date											