

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

RECEIVED

1951

Submit this report in triplicate to the Oil Conservation Commission District Office within ten days after the work specified is completed. It should be signed and filed as a report on beginning drilling operations, results of shooting well, results of test of casing shut off, result of plugging of well, 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 REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL	X	REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

November 30, 1951

Date

Midland, Texas

Place

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

The Texas Company State of New Mexico "O" Well No. 5 in the
 Company or Operator Lease
 SE/4 NW/4 of Sec. 36, T. 17-3, R. 34-E, N. M. P. M.,
 Vacuum Pool Lea County.

The dates of this work were as follows: See Below

Notice of intention to do the work ~~was~~ (was not) submitted on Form C-102 on _____, 19____,
 and approval of the proposed plan ~~was~~ (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

TD: 4725 - Lime

On 24 hour production test well flowed 22 bbls oil thru 24/64" choke.

In an attempt to increase production, acidized open hole 4072-4720 with 3000 gals 15% Chemical Process acid using 250 gals form gel 4720 to TD on 11-19-51.

On 24 hour production test ending 11-21-51, well flowed 79.24 bbls oil thru 24/64" choke.

Witnessed by _____ Name _____ Company _____ Title _____

APPROVED:
 OIL CONSERVATION COMMISSION

Ray Garbrosch
 Name _____ Title _____

Date

19

I hereby swear or affirm that the information given above is true and correct.

Name _____

Position Ass't. Dist. Supt.

Representing The Texas Company
 Company or Operator

Address Box 1270, Midland, Texas