

N. MEXICO OIL CONSERVATION CO. MISSION

MISCELLANEOUS REPORTS ON WELLS

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 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			

1-21-52

Date

Hobbs, New Mexico

Place

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

Phillips Chemical Company Company or Operator Cham Santa Fe Lease Well No. 5 in the
 NW/4 SE/4 of Sec. 21, T. 17S, R. 35E, N. M. P. M.,
 Vacuum Pool Lea County.

The dates of this work were as follows: 1-18-52

Notice of intention to do the work was (crossed out) submitted on Form C-102 on 1-21-52, 19____, and approval of the proposed plan (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Western Company treated San Andres Formation from 4437' to 4780' with 5000 gallons 15% regular acid. Flushed with 22 barrels oil. Maximum tubing pressure 2500#, minimum 2350#. Swabbed 6 hours, recovered flush oil and 40 barrels acid water. Shut in 12 hours, tubing pressure 100#. 1-20-52 Swabbed 10 hours, 40 barrels acid water and 23 barrels formation oil. Shut in 14 hours, tubing pressure 225#.

Witnessed by _____ Name _____ Company _____ Title _____

APPROVED:
OIL CONSERVATION COMMISSION

Ray J. H. H. H.
Name _____ Title _____

FEB 1 1952
Date _____, 19____

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

Name *E. H. H. H.*

Position Administrative Assistant

Representing Phillips Chemical Company Company or Operator *PHC*

Address Bartlesville, Oklahoma