

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

HOBBS OFFICE OCC

MISCELLANEOUS REPORTS ON WELLS

1955 FEB 2 PM 1:27

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	X	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other) Dual Completion	X

January 31, 1955

(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

(Company or Operator)

State of New Mexico "G"

(Lease)

J. P. (Bum) Gibbins Inc.

(Contractor)

Well No. 2 in the SW 1/4 SW 1/4 of Sec. 19

T 19-S, R. 37-E, NMPM. (Monument) (Eumont Gas) Pool, Lea County.

The Dates of this work were as follows: 1-19-55 to 1-29-55

Notice of intention to do the work (was) ~~xxx~~ submitted on Form C-102 on January 18, 1955.

(Cross out incorrect words)

and approval of the proposed plan (was) ~~xxxx~~ obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

TD - 4004'

7" casing set at 3870'

Ran and cemented 126 joints of 4-1/2" casing set at 3880' with 450 sacks. Cement circulated. Completed 4:00 p.m. 1-20-55. Tested casing with 700 lbs pressure for 30 minutes. Tested okay. Perforated 4-1/2" casing from 3422'-3560', 2 shots per foot. Treated formation thru perfs with 500 gallons of regular acid and 6000 gallons of sand frac. Gas zone test was 4487 MCF daily thru a 3/4" choke. Oil zone test: Flowed 51 bbls of 32 gravity oil in 18 hours thru a 12/64" choke.

Witnessed by _____ (Name) _____ (Company) _____ (Title)

Approved: _____
OIL CONSERVATION COMMISSION

L. G. Stanley
(Name)

(Title)

(Date)

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

Name *W. C. ...*

Position Asst. Dist. Supt.

Representing The Texas Company

Address Box 1270, Midland, Texas