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 REPORT ON RESULT OF TEST REPORT ON DRILLING OPERATIONS OF CASING SHUT-OFF REPAIRING WELL REPORT ON RESULT REPORT ON RECOMPLETION REPORT ON OF PLUGGING WELL **OPERATION** (Other)Casing Repair Ä ctober 2, 1954 noubs hew exico Following is a report on the work done and the results obtained under the heading noted above at the tanulind 11 and has Company tate 1 11 let 7
(Company or Operator) (Lease) J. (inm; Cibbins , Well No. 8 in the No. 1/4 in 1/4 of Sec. 10 , T. 19-5, R38-E, NMPM, Hobbs Pool, Lea County The Dates of this work were as follows: 10/8/54 through 10/20/54 Notice of intention to do the work (was) (was por) submitted on Form C102 on ROY CIRCLET 24. , 19.53, and approval of the proposed plan (was) (was not) obtained. DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED Supplemental results of casing leak repair is as follows: de cut off 8-5/8" casing below leak and pailed 227'. derun new 8-5/8" casing and latched on with casing pack-off boal. Tested casing with 1000 osi and test to K. Tashed with 500 gallons 15% regular. On Fotential Test flowed 87 Bb and 12 of in 24 hours. GUR 2930. Estimated allowable 39 BORD effective 10/20/54.

Witnessed by	T. J. Thirpen Stand	lind 11 and 1 Donostry Farm Boss (Company) (Title)
Approved:	oit conservation commission	I hereby certify that the information given above is true and complete to the best of my knowledge.
()	Karley	Name & Mph Lylenduckoon
	(Name)	Position Field Superintendent
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(Title)	(Date)	Addressgoxobba.,nowexico

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