N SHEE OF COPIE		<u>_</u> _	
2-13	CONTRACTOR	_	
1447 6 1 5			
11.			
434.5			
I AND OFFICE			
TRANSPORTER	OIL		
	0.4.9		
PHORATION OFFIC			4.4
OPERATOR			I

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTSBORFWEEDSC.C.

منقر

FORM C-103 (Rev 3-55)

(Submit to appropriate District C	Office asther	ESmmlasian	RM-" (106)
-----------------------------------	---------------	------------	------------

		·····				1101 10	IN TT UI		
Name of Comp ABBOTT B		•		Addro		Vebba	Nove Moret es		
Lease			Well No.	Unit Letter		n Township	New Mexico		
Humble S	tate		1	Np#	2	T-19		Range R-36-E	
Date Work Per		Pool				County			
10-17. 1	1-13-63	Undesigne				Lea			
		and the second	A REPORT	OF: (Check	appropri	ate block)			•
X Beginnio	g Drilling Operation		ising Test a	nd Cement Jo	Ь	Other ()	Explain):		
X Plugging		: 🛄 Re	emedial Work						•
Detailed accor	unt of work done, n	ature and quantity	of materials	used, and re	sults obt	ained.			
	r								
Spudde	d 17" hole wi	th cable too	ols 10-17	7-63. Dr	illed :	174 1	n ole to 4 0), drill	əd
12-1/2	" hole to 230	T.D. Well	plugged	and aban	d oned :	11-13-63	as follow	s: Set	
Plug #	l from 230' t	o 180' with	25 sacks	regular	cemen	t, Set			•
· Plug #	2 from 15' to	0' with 10	sacks re	gular ce	ment.	Installe	d marker	88	
requir	ed by N.M.O.C	.C.							ін п
	°						•	,	• .
	·								
		·				,			
				1					
Witnessed by	Murrell Abb	ott	Position Partne			Company ABBOT	BROTHERS	· · · · · · · · · · · · · · · · · · ·	
	<u></u>	FILL IN BEI				·			
······				INAL WELL		EFURIS			
DF Elev.	TD		PBTI	وحدد وبرقية برجانية استانكا		Producing	Interval	Completi	ion Date
	l		· · ·						
Tubing Diamet	er	Tubing Depth		Oil Str	ing Diam	eter	Oil Stri	ng Depth	
Perforated Inte									
Periorated inte	TAT(B)								
Open Hole Interval			Produc	Producing Formation(s)					
			RESUL	TS OF WOR	KOVER	Which is a surrow of the su			
Test	Date of	Oil Production	Gas	Production	Water J	Production	GOR	Gae	Well Potential
	Test	BPD		CFPD		PD	Cubic feet/		ACFPD
Before Workover									
After Workover		. •		*************************************					
			······	I hei to th	eby certil	fy that the in my knowled	formation give	en above is ti	rue and complete
and the second second second second		TION COMMISSION							
Approved by 4	A C	Anna 1		' Name	Mu	nell	all	No	
Title	A CARACTER STATE	the second s	and an	Posi t Par	tner		<u> </u>	- 	an a
Date			· · ·	Comp ABE		OTHERS			