

NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

~~Sinclair Oil Corporation Merged~~
~~into Atlantic Richfield Company~~

COMPANY Sinclair Oil & Gas Company - 520 East Broadway - Hobbs, New Mexico
(Address)

LEASE State 157 "G" WELL NO. 2 UNIT G S 5 T 22S R 36E
DATE WORK PERFORMED As Shown POOL South Eunice

This is a Report of: (Check appropriate block) ☐ Results of Test of Casing Shut-off
☐ Beginning Drilling Operations ☐ Remedial Work
☐ Plugging ☐ Other Perforate, Fracture, Acidize

Detailed account of work done, nature and quantity of materials used and results obtained.
10-20-58 3877 Queen - Pulled 2" tubing - Ran sand pump & cleaned out f/3872 to 3877.
10-21-58 3877 Queen - Ran Gamma Ray & collar locator & perforated esg. f/3814-3824 w/40
1/2" Jet shots. Set Baker Retrieivable Retained @ 3828. Ran 2" UE
tbg. to 3801'. Acidized w/500 gal. mud acid. Max. press. 1100#.
Min. on vacuum. Inj. rate 3.2 bbls. per min. Pulled 2" tbg.
10-22-58 3877 Queen - Frased perf. f/3814-3824 w/15,000 gal. refined oil & 15,000# sand.
Max. press. 2900# - Min. 2000#. 5 min. SIP 1800#. 2 hrs. on vacuum.
Total load 838 bbls. oil. Ran 2" tbg. & pulled Retrieivable Bridging
plug. Reran 2" UE tbg. to 3831'.
10-25-58 3877 Queen - Flowed 245 bbls. load oil 20 hrs. & 44 bbls. new 35.1 Gvty oil in
4 hrs. 20/64" choke - 400# tbg. 525 esg. GOR 1140 - For a 24 hr.
calculated potential of 264 bbls. Increasing allowable from 15 to
34 bbls. oil per calendar day effective 10-25-58.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. _____ TD _____ PBD _____ Prod. Int. _____ Compl Date _____
Tbng. Dia _____ Tbng Depth _____ Oil String Dia _____ Oil String Depth _____
Perf Interval (s) _____
Open Hole Interval _____ Producing Formation (s) _____

RESULTS OF WORKOVER:

	BEFORE	AFTER
Date of Test	_____	_____
Oil Production, bbls. per day	_____	_____
Gas Production, Mcf per day	_____	_____
Water Production, bbls. per day	_____	_____
Gas-Oil Ratio, cu. ft. per bbl.	_____	_____
Gas Well Potential, Mcf per day	_____	_____
Witnessed by _____		

(Company)

OIL CONSERVATION COMMISSION

Name [Signature]
Title _____
Date _____

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

Name [Signature]
Position District Superintendent
Company Sinclair Oil & Gas Company