

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

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

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)

<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Results of Test of Casing Shut-off
<input type="checkbox"/> Plugging	<input checked="" type="checkbox"/> Remedial Work
	<input checked="" type="checkbox"/> Other <u>Fractured</u>

Detailed account of work done, nature and quantity of materials used and results obtained.

- 4-18-56: Pulling tubing, cleaned out to bottom and preparing to fracture.
- 4-20-56: Queen Sand @ 3877'. Fractured w/6000 gal. oil and 6000# sand. Max. pressure 5400#. Min. pressure 4600#. Inj. rate 11.3 bbls. per min. 10 min. shut in pressure 1500#. Preparing to swab. and test.
- 4-21-56: Ran 2" tubing ~~bottom~~ at 3858'.
- 4-24-56: Flowed 110 bbls. 35.2 gravity oil in 24 hours. thru 11/64" choke. GOR 1222. Csg. pressure 800#. Tubing 250#. Completed as an oil well, 4-24-56. Top allowable of 40 bbls. per day.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. 3598 TD 3877 PBD 00 Prod. Int. 3835-3877 Compl Date 5-16-51
Tbng. Dia 2 1/8 Tbng Depth 3773 Oil String Dia 5 1/2 Oil String Depth 3835
Perf Interval (s) None
Open Hole Interval None Producing Formation (s) Queen Sand

RESULTS OF WORKOVER:

	BEFORE	AFTER
Date of Test	<u>5-16-51</u>	<u>4-24-56</u>
Oil Production, bbls. per day	<u>18</u>	<u>110 bbls.</u>
Gas Production, Mcf per day	<u>0</u>	<u>0</u>
Water Production, bbls. per day	<u>0</u>	<u>0</u>
Gas-Oil Ratio, cu. ft. per bbl.	<u>133</u>	<u>1222</u>
Gas Well Potential, Mcf per day	<u>0</u>	<u>0</u>

Witnessed by H. A. Lund Sinclair Oil & Gas Company
(Company)

OIL CONSERVATION COMMISSION

Name [Signature]
Title ORIGINAL AND 2 COPIES SIGNED BY
Date [Signature]

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

Name [Signature]
Position Dist. Supt.
Company Sinclair Oil & Gas Company

Orgl. & 2cc: OGC

cc: FHR, HFD, File