NEW MEXICO DIL CONSERVATION COMMISSION

FORM C-103 (Rev 3-55)

		MISCELL	_ANEOUS RE	EPOR'	TS ON	WELLS			Tips occ	
	(Submit to appropri	ate District Offi	ce as p	er Commi	ssion Rule			1 - 1	
ame of Company Sinclair 041 & Gas Company				Address 520 E Broadsay, Ho			bbs, New Mexico			
State 157 D		V	Vell No. Unit	Letter	Section 1	Cownship		Range 361		
te Work Perfo	ormed	Pool	ad		Co	Los		فالتجريب بردوي	医克里克氏试验检尿病 医皮肤炎 医二甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲甲	
-2h-5h to	, ,,-	THIS IS	A REPORT OF:	Check o	appropriate	block)				
Beginning	Drilling Operatio	ns Cas	sing Test and Cen	ent Job		Other (Ex	plain):			
Plugging	Plugging Remedial Work led account of work done, nature and quantity of materials used, and tesults obtained.									
9-8-5l4	Cleaned or Set HRC to top cement Set HRC to 3700' from 3677 w/Gut 1/3610 to 1/00#, 1 hr	t to 3753. Re g tool @ 3615 t to 3735, to el at 3620, in at 3700'. Re at 3720' w/l2 liberson packer 3700. inj re r SIP-Zero. Po kyburg - On po in 2h hrs thr	sted 7 bbls sested 7 bbls sested cag a rilled to 37 squeezed w/7 gallens Hydrat 3610. Ste h BPN, Marilled the & rilled the	water 1500 20, to pake paite. andoil x Pres paelos	per he of, no l metod 6 coment. Pulloc L frace ss 3900 r & res	bols wa. Teste tog & ' tog & ' w/1000 // Min P	queeged to reas 220 g to 370 bls new	s/75 sar. Ingged , ren i & is Of, 5	ts coment, back to 2" the to 00 lbs sand. min SIP-	
Vitnessed by Position FILL IN BELOW FOR REME					Company JIAL WORK REPORTS ONLY					
			ORIGINAL	WELL	DATA	Producing	Interval	Co	mpletion Date	
D F Elev. T D 3761.			F B 4 D			3650 - 3761			12-1-39	
		Tubing Depth			ing Diameter 5-1/2"		Oil St	Oil String Depth 3650		
Perforated Int	erval(s)									
Open Hole Interval 3650 - 3761					Producing Formation(s) Crayburg					
			RESULTS			Production	T GO	P	Gas Well Potenti	
Test	Date of Test	Oil Producti BPD	on Gas Prod MCF			PD	Cubic feet/Bbl		MCFPD	
Before Workover	8-1-54	14	61. =	ed .	12	9	4.358			
After Workover	9-8-54	ħ	960 ×	ef .	ł.	9	23,436		in two and com-	
	OIL CONSER	VATION COMMISSI	ON	to t	ereby certi the best of	fy that the 1 my knowled	ntormation g	ven ano	ve is true and comp	
Approved by					Name					
Title					Position Dist. Supt.					
Date				Con	npany Sincla i	r 041 &	Gas Co.			