

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

HOBBS OFFICE OCC

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 DRILLING OPERATIONS		REPORT ON RESULT OF TEST OF CASING SHUT-OFF	<input checked="" type="checkbox"/>	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other)	

June 24, 1954

(Date)

Hobbs, New Mexico

(Place)

Following is a report on the work done and the results obtained under the heading noted above at the

Astec Oil and Gas Company

(Company or Operator)

State

(Lease)

Makin Drilling Co.

(Contractor)

Well No. **1** in the Unit **C** 1/4 of Sec. **2**

T. **21S**, R. **37E**, NMPM, **Undesignated (Terry-Elmhurst)** Pool, **Lea** County.

The Dates of this work were as follows: **6-21-54 6-23-54**

Notice of intention to do the work (was) ~~XXXX~~ submitted on Form C-102 on **191**, 19____, (Cross out incorrect words)

and approval of the proposed plan (was) ~~XXXX~~ obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

A 7-7/8" Hole was drilled to a depth of 6060 and 5 1/2" 15.5# new casing was cemented at that depth using 200 sacks neat cement. The casing and cement job was tested with 1000 psi for 30 minutes and found to be ok. A temperature survey indicated the top of cement to be at 4930 outside the casing. Cement was allowed to set 48 hours before resuming operations.

Witnessed by **P. R. Watts, Jr.**
(Name)

Astec Oil and Gas Co.
(Company)

Engineer
(Title)

Approved:

OIL CONSERVATION COMMISSION

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

Name **[Signature]**

Position

Representing

Address

(Title)

(Date)

1954