

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Cities Service Oil Company

Box 97, Hobbs, New Mexico

(Address)

LEASE State "S" WELL NO. 3 UNIT F S 15 T 21-S R 37-E

DATE WORK PERFORMED 4-1-59 POOL Brunson

This is a Report of: (Check appropriate block) ☐ Results of Test of Casing Shut-off

☐ Beginning Drilling Operations

☐ Remedial Work

☐ Plugging

☒ Other Shut-in of well

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

**This well was shut-in 4-1-59.**

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

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

Name \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Position \_\_\_\_\_

Date \_\_\_\_\_

Company \_\_\_\_\_

Cities Service Oil Co.