

OIL CONSERVATION COMMISSION

BOX 2045

HOBBS, NEW MEXICO

DATE March 5, 1959

TO:

R. M. Moran

Box 1718

Hobbs, New Mexico

RE: Flaring of casinghead gas

Gentlemen:

Form C-110 for your	<u>State "36" #1-K</u>	<u>36-22-37</u>	<u>Blinebry</u>
	<u>Lease</u>	<u>C-T-R</u>	<u>Pool</u>

which was completed 2/3/59, indicates that no connection has been made for the sale of casinghead gas from this well. To comply with Order R-553 you must, therefore, obtain a connection, or secure a no-flare order from the Commission not later than 5/3/59.

Failure to comply with these instructions will result in allowable cancellation without further notice.

Yours very truly,

OIL CONSERVATION COMMISSION

Proration Manager

Title

LJP/hs

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY R.M.Moran Box 1718 Hobbs, New Mexico  
(Address)

LEASE State "36" WELL NO. 1 UNIT K S 36 T 22S R 37E  
DATE WORK PERFORMED 1-14 - 30/59 POOL Blinebry

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

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

Open hole 6005 - 6082. Acid w/2500 gal., 15% LSTNE max.press. 1800# min. 1700#, inj.rate 2.6 bbls./min.total acid and load 120 bbls. swab back 100 bbls. frac w/20,000 gals. 60,000# max.press.2800# min. 2300# inj.rate 20.9 BPM total load 980 bbls. rec. 854 bbls.load. Swab some oil, measured gas on csg. 55 MCF P.D.  
1-29-59 set east iron bridge plug @ 5910', perf. 3 shots/ft. 5" jets 5562 - 5582.  
1-30-59 Spot 1000 gals. x W-24 frac w/10,000 gals.-30,000# max press. 1900# min.1800# avg.inj.rate 20 BPM 5 min.SI 1600#.

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 \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Name R.M.Moran  
Position R.M.Moran - Operator  
Company R.M.Moran

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