Form 9-331a
(Feb. 1951)

(SUBMIT IN TRIPLICATE)

Land Office __Lee Cruces__

Lease No. __032451-0__

UNITED STATES
DEPARTMENT OF THE INTERIOR
SEP GEOLOGICAL SURVEY

Unit _____

T 24 3

Sec. 22

X

R-36-E, NMPM

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	X
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL	SUBSEQUENT REPORT OF RE-DRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL		

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

_____September 15_____, 1964

Well No. __1__ is located __1650__ ft. from [N] line and __330__ ft. from [E] line of sec. __22__

__NE/4 Section 22__
(¼ Sec. and Sec. No.)   __T-24-S__ (Twp.)   __R-36-E__ (Range)   __NMPM__ (Meridian)

__Jalmat Ga__
(Field)   __Lea County__
(County or Subdivision)   __New Mexico__
(State or Territory)

The elevation of the derrick floor above sea level is __3345__ ft. (est.). Lease: Pan American-Myers

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Casing perforations 3120-3150, 3160-3230 and 3250-3360' opposite Yates.

Well died October, 1963. Remedial work performed October 14 - November 2, 1963. Injected 220 gallons Nutro No. 27 (sulphate treating agent). Swabbed back heavy BS. Injected 55 gallons Nutro NKDT dissolved in 275 gallons 15% NE acid. Swabbed back BS. Failed to establish flow. Treated with 2000 gal. fresh water. Swabbed back heavy BS. Kicked well off by swabbing. Turned to El Paso low pressure gas-gathering system.

Note: Chemical treatment re-established essentially same deliverability as exhibited by well prior to treatment.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company __Thompson & Cone__

Address __Box 371__

__Lubbock, Texas 79408__

By __L. O. Storm__

Title __Engineer__

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT ~~CASINGHEAD~~ NATURAL GAS

(Federal)

Company or Operator _____Thompson & Cone_____ Lease Pan American-Myers 1

Well No. __1__ Unit Letter E, S 22, T-24-S, R -36-E Pool Jalmat Gas

County __Lea__ Kind of Lease (State, Fed. or Patented) __Federal__

If well produces oil or condensate, give location of tanks: Unit ___ S ___ T ___ R ___

Authorized Transporter of Oil or Condensate _____None_____

Address _____
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____El Paso Natural Gas Company_____

Address _____Jal, New Mexico_____
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

_____

_____

Reasons for Filing: (Please check proper box)   New Well _____ ( )

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership _____ ( ) Other _____ (X)

Remarks: (Give explanation below)

This Certificate filed to amend C-110 of May 10, 1954 only as to lease name and dry gas pool name.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the __20th__ day of __November__ 19 57

By _____/s/ L. O. Storm_____

Approved _____ 19 ___   Title ____Engineer____

OIL CONSERVATION COMMISSION   Company __Thompson & Cone__

By _____   Address 1708 Great Plains Life Building

Title _____   Lubbock, Texas

NEW MEXICO OIL CONSERVATION COMMISSION

HOBBS OFFICE

1957 DEC 9 AM 10:31

MULTI-POINT BACK PRESSURE TEST FOR GAS WELLS

Form C-122
Revised 12-1-55

Pool **Jalmat** Formation **Yates** County **Lea**

Initial_____ Annual_____ Special **X** Date of Test **4/8-4/12/1957**

Company **Thompson & Cone** Lease **Pan American-Myers** Well No. **1**

Unit **H** Sec. **22** Twp. **24-S** Rge. **36-E** Purchaser **El Paso Natural Gas Company**

Casing **5-1/2** Wt. **14** I.D. **5.012** Set at **3473** Perf. **3120** To **3360**

Tubing **2-3/8** Wt. **4.7** I.D. **1.995** Set at **3358** Perf. **3354** To **3357**

Gas Pay: From **3120** To **3360** L **3354** xG **0.660** -GL **2214** Bar.Press. **13.2**

Producing Thru: Casing_____ Tubing **X** Type Well **Single**

Date of Completion: **March 1, 1954** Packer **None** Single-Bradenhead-G. G. or G.O. Dual Reservoir Temp._____

OBSERVED DATA

Tested Through ~~_____~~ (Meter) Type Taps **Flange**

No.	Flow Data (Line) Size	(Orifice) Size	Press. psig	Diff. h_w	Temp. °F.	Tubing Data Press. psig	Temp. °F.	Casing Data Press. psig	Temp. °F.	Duration of Flow Hr.
SI						430		494		72
1.	4,000	0.750	225	29.18	59	340		450		24
2.	4,000	0.750	240	42.90	65	310		427		24
3.	4,000	0.750	237	81.90	70	324		384		24
4.	4,000	0.750	222	86.49	48	300		370		24
5.										

FLOW CALCULATIONS

No.	Coefficient (24-Hour)	$\sqrt{h_w p_f}$	Pressure psia	Flow Temp. Factor F_t	Gravity Factor F_g	Compress. Factor F_{pv}	Rate of Flow Q-MCFPD @ 15.025 psia
1.	3.435	83.31		1.0010	0.9535	1.025	280
2.	3.435	104.18		0.9952	0.9535	1.025	347
3.	3.435	143.09		0.9905	0.9535	1.023	475
4.	3.435	142.57		1.0117	0.9535	1.027	486
5.							

PRESSURE CALCULATIONS

Gas Liquid Hydrocarbon Ratio_____ cf/bbl. Specific Gravity Separator Gas **0.660**

Gravity of Liquid Hydrocarbons_____ deg. Specific Gravity Flowing Fluid_____

F_c **Measured** $(1-e^{-s})$_____ P_c **507.2** P_c^2 **257.3**

No.	P_t (psia)	P_t^2	$F_c Q$	$(F_c Q)^2$	$(F_c Q)^2 (1-e^{-s})$	P_w^2	$P_c^2 - P_w^2$	Cal. P_w	$\frac{P_w}{P_c}$
1.	353.2	124.8				214.6	42.7	463.2	0.9132
2.	323.2	104.5				193.8	63.5	440.2	0.8879
3.	337.2	113.7				157.8	99.5	397.2	0.7831
4.	313.2	98.1				146.8	110.5	383.2	0.7555
5.									

Absolute Potential: **800** MCFPD; n **0.587**

COMPANY **Thompson & Cone**

ADDRESS **1706 Great Plains Life Building, Lubbock, Texas**

AGENT and TITLE _~~signature~~_ - **L. O. Storm, Professional Engineer**

WITNESSED)
COMPANY) **El Paso Natural Gas Company**

REMARKS

INSTRUCTIONS

This form is to be used for reporting multi-point back pressure tests on gas wells in the State, except those on which special orders are applicable. Three copies of this form and the back pressure curve shall be filed with the Commission at Box 871, Santa Fe.

The log log paper used for plotting the back pressure curve shall be of at least three inch cycles.

NOMENCLATURE

Q = Actual rate of flow at end of flow period at W. H. working pressure (P_w). MCF/da. @ 15.025 psia and 60° F.

P_c = 72 hour wellhead shut-in casing (or tubing) pressure whichever is greater. psia

P_w = Static wellhead working pressure as determined at the end of flow period. (Casing if flowing thru tubing, tubing if flowing thru casing.) psia

P_t = Flowing wellhead pressure (tubing if flowing through tubing, casing if flowing through casing.) psia

P_f = Meter pressure, psia.

h_w = Differential meter pressure, inches water.

F_g = Gravity correction factor.

F_t = Flowing temperature correction factor.

F_{pv} = Supercompressability factor.

n = Slope of back pressure curve.

Note: If P_w cannot be taken because of manner of completion or condition of well, then P_w must be calculated by adding the pressure drop due to friction within the flow string to P_t.