

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPPLICATE 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		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other) <b>Acid treatment</b>	<b>x</b>

**July 27, 1953**

(Date)

**Hobbs, New Mexico**

(Place)

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

**Humble Oil & Refining Company**

(Company or Operator)

**J. A. E. Knight**

(Lease)

**J. P. (Dum) Gibbins**

(Contractor)

Well No. **1** in the **NW**  $\frac{1}{4}$  **SW**  $\frac{1}{4}$  of Sec. **14**

T. **24S** R. **37E**, NMPM, **Fowler-Ellenburger** Pool, **Lea** County.

The Dates of this work were as follows: **7-26-53**

Notice of intention to do the work (was) ~~(XXXXX)~~ submitted on Form C-102 on **7-26-53**, 19\_\_\_\_, (Cross out incorrect words)

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

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Treated 9025-9070' with 2000 gallons Dowell XF-32 15% L. T. acid. Maximum and minimum tubing pressures 1800 and 1600#. Injection rate 1.5 barrels per minute. Casing pressure during treatment 750#. Flushed tubing with 34 barrels water.

Swabbed well 24 hours on 7-27-53, last 12 hours recovered 24 barrels fluid, 98% water, chloride 29,000 PPM.

Witnessed by **J. P. Gibbins** (Name) **Humble Oil & Refining Company** (Company) **Ast. Dist. Superintendent** (Title)

Approved: **OIL CONSERVATION COMMISSION**

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

Name **M. M. Ryan**

Position **District Superintendent**

Representing **Humble Oil & Refining Company**

Address **Box 2347, Hobbs, N. M.**

**Oil & Gas Inspector**

mbh/mab

(Date)