

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY

A. S. Brininstoel

(Address)

LEASE Brininstoel State WELL NO. 1 UNIT P S 15 T 21 R 27

DATE WORK PERFORMED 7/15/57 POOL Magruder Yates

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

☐ Beginning Drilling Operations

☐ Remedial Work

☐ Plugging

☐ Other Abandment  
Temporary Abandonment

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

Well was Capped with Steel Plate, ~~Rhs~~ Bolted on and rubber gasket  
My intentions are to put a pump in this well sometime within  
the next six months Your office will be advised at that time

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 A. S. Brininstoel

Title \_\_\_\_\_

Position Operator

Date \_\_\_\_\_

Company A. S. Brininstoel