

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Shelton-Warren Oil Producers  
(Address)

LEASE Gulf State WELL NO. 1-27 UNIT B S 27 T 14 R 31  
DATE WORK PERFORMED 2-21-58 POOL Caprock Queen

This is a Report of: (Check appropriate block)

<input checked="" type="checkbox"/> Results of Test of Casing Shut-off
<input type="checkbox"/> Beginning Drilling Operations
<input type="checkbox"/> Remedial Work
<input type="checkbox"/> Plugging
<input checked="" type="checkbox"/> Other _____

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

2-12-58 Spudded

2-13-58 Set 195' 8 5/8 surf. csg. cemented with 125 sx by Halliburton Oil Well Cementing Co. Tested 500# psi.

2-21-58 Set 3127' 4 1/2" 11.6# J-55 Csg. (Production string) Tested 500# psi.

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

Name E. Fischer  
Title Engineer in Charge  
Date 2-21-58

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

Name Gregory Salinas  
Position Agent  
Company Shelton-Warren Oil Producers