

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Tidewater Oil Company Box 547 Hobbs, New Mexico  
(Address)

LEASE State "AM" WELL NO. 1 UNIT 0 S 22 T 19S R 37E

DATE WORK PERFORMED 3-26-57 thru POOL Emment  
3-28-57

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.

3-26-57 Spudded 12-1/4" surface hole at 9:00 PM. Drilled to a total depth of 385'.

3-27-57 Ran, set and cemented 8-5/8" surface casing at 375' with 300 sks. of neg. cement. Plug down at 10:30 AM. Cement circulated. U.O.C. 30 hrs.

3-28-57 Tested 8-5/8" casing with 500 psi for 30 mins. with no drop in pressure. Drilled out with 7-7/8" bit.

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 E. Fischer  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Name \_\_\_\_\_  
Position Production Foreman  
Company Tidewater Oil Company