

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106) 11 2 14

COMPANY Len G. McCormick and Associates Box 1205 Midland, Texas  
(Address)

LEASE Phillips State WELL NO. 1 UNIT P S 7 T 17 R 33

DATE WORK PERFORMED 11-23-57 POOL Undesignated

This is a Report of: (Check appropriate block)  Results of Test of Casing Shut-off  
5-1/2"  
 Beginning Drilling Operations  Remedial Work  
 Plugging  Other \_\_\_\_\_

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

5-1/2" 11# casing set at 4473' with two stage cement job, DV tool at 2840'  
235 ex. first stage, 1300 ex. second stage. Tested OK.

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 <u>Stewart Bresland</u>	<u>Gackle Drilling Company-Contractor</u> (Company)	

OIL CONSERVATION COMMISSION

Name [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name [Signature]  
Position Agent  
Company Len G. McCormick  
Box 1205  
Midland, Texas