

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Magnolia Petroleum Company, Box 2406, Hobbs, New Mexico  
(Address)

LEASE D. E. Fanning WELL NO. 2 UNIT I S 11 T 18S R 26E  
DATE WORK PERFORMED 12/29/56-1/1/57 POOL Undesignated

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.  
Set 1800' of 5½" casing @ 1800' cemented w/320 sks., Circ. PD 10:00 P.M. 12/29/56.  
Tested 5½" casing w/800# for 30 minutes after washing out, no break.

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 _____		

OIL CONSERVATION COMMISSION		I hereby certify that the information given above is true and complete to the best of my knowledge.	
Name <u>M. L. Armstrong</u>	Name <u>M. L. Vougharty</u>		
Title _____	Position <u>District Superintendent</u>		
Date _____	Company <u>Magnolia Petroleum Company</u>		