

Vernon E. Faulconer, Inc

WORKOVER REPORT

Well Name: **FOREHAND FEDERAL #1**

Field: **CARLSBAD, S.**

Date:

Co. Consultant: **DON REIDLE**

01-16-01

place OOH w/pkr. Close blind rows. Press to 1000# for inj, rate took 2 mins to bleed to 900#. Call office. Set up tools to drl out cmt in morning. Close BOP.

Secure well. SDFN.

CTD: \$ 3,609.81

TCTD: \$ 114,527.26

*******FINAL REPORT*******

DR: mam
Orig: BB File
cc: MF/BS