

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY AMCO OIL & GAS COMPANY Box 447 Hobbs, New Mexico  
(Address)

LEASE State of N.M. Well No. 2 UNIT A S 2 T 100 R 33E

DATE WORK PERFORMED 7-1-57 POOL Lane Wellcamp

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.

This well was drilled 7-1-57. It was drilled to 355' and 12 3/8" 43# casing cemented to 355' and 229' cement was placed in the annulus and 100 sacks of neat cement. Cement was run in 100 sacks. Cement was allowed to set for forty hours before running casing tool. Cement was tested to 500 psi and found to be O.K.

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 \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Original Signed By \_\_\_\_\_  
Name P. R. WATTS, JR.  
Position District Superintendent  
Company AMCO Oil & Gas Company