

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS  
(Submit to appropriate District Office as per Commission Rule 1106)

Company Joseph L. O'Neill, Jr.  
(Address)  
Lease State E Well No. 1 Unit 8 S 30 T 15S R 31E  
Date work performed 6/8/55 POOL Undesignated

This is a Report of (Check appropriate block) ☒ Result 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 9-5/8 inch casing at 315 feet and cemented with 200 sacks cement. Tested  
30 minutes 1000# pressure. No drop.

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

Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

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

Name \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Joseph L. O'Neill, Jr.