

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY **Great Western Drilling Company, Box 1659, Midland, Texas**

(Address)

**Pebble Queen Unit**

LEASE **Tract #12** WELL NO. **35-16** UNIT **P** S **33** T **12** R **12**

DATE WORK PERFORMED \_\_\_\_\_ POOL \_\_\_\_\_

This is a Report of: (Check appropriate block) ☐ Results of Test of Casing Shut-off  
☐ Beginning Drilling Operations ☐ Remedial Work  
☐ Plugging ☒ Other **Change of Operator**

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

**Well 35-16, Tract 12 joined the Pebble Queen Unit as of June 1, 1960**

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

|                                 | 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 \_\_\_\_\_ 1960

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

Name **O. H. Crow** (O. H. Crow)

Position **General Superintendent**

Company **Great Western Drilling Company**