

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

Company Ada Oil Company, Box 126, Midland, Texas  
(Address)

Lease Levick-State Well No. 2 Unit P S 35 T 13S R 31E  
Date work performed 6-15-55 POOL Drickey Queen

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.

On 6-15-55 at TD of 3085' ran 97 jts, 3071', of 5 1/2" OD 14# J-55 ST&C casing set at 3064.93' and cemented w/115 sz regular cement. Plug down at 6:20 AM. WOC 24 hrs and tested w/1500# for 30 min held OK.

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 _____	Name <u>(Signature)</u> (C. L. Fly, Jr.)
Title _____	Position <u>Chief Clerk</u>
Date _____	Company <u>Ada Oil Company</u>