

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)

LEASE State "A" WELL NO. 1 UNIT N H S 31 T 13-S R 32-E

DATE WORK PERFORMED \_\_\_\_\_ POOL Wildcat Devonian - Lea County

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.

We request permission to keep the above salt water source well on a stand-by-status pending studies being conducted for its use. A report will be sent to the Commission every 6 months.

PLEASE PRINT NAME AND ADDRESS OF  
PERSON TO WHOM YOU WANT YOUR  
FUTURE REPORTS SENT

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 [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name [Signature] O.H.Crews  
Position Administrative Coordinator  
Company Great Western Drilling Company