

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

COMPANY Amerada Petroleum Corporation, Box 636, Lovington, New Mexico
(Address)

LEASE State S "J" WELL NO. 7 UNIT 6 S 23 T 14-S R 33-E
DATE WORK PERFORMED 4-15-16-17-18-19 POOL Saunders

This is a Report of: (Check appropriate block)

<input checked="" type="checkbox"/> Results of Test of Casing Shut-off	
<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Remedial Work
<input type="checkbox"/> Plugging	<input type="checkbox"/> Other _____

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

9946' TD, Finished 7-7/8" Hole @ 10:15 PM 4-15-59, Ran 146 Joints 5-1/2" OD 17# N80 @ 355 Casing Liner Set @ 9943' Cemented with 600 Sacks Sls Set Cement Mixed 2% Gel, Pumped Plug to 9855' w/Max PP 2000# @ 10:30 PM 4-17-59, 8-5/8" x 5-1/2" Dash Ross Liner Set @ 4034' & Cemented with 200 Sacks Reg Cement down 4 1/2" BP with 8-5/8" HOWCO RTTS Squeeze Tool @ 3905', Squeezed top of Liner with Max PP 2200#, Displaced Cement to 3965' Left 69' Cement in 8-5/8" Casing. Held 2000# Pressure on Cement. for 4 Hrs, Released Pressure Held OK, WOC Tested Csg with 1000# Before Drilling Cement Held OK, Test Top of 5 1/2" Csg Liner after Drilling Cement w/1500# Held OK Tested Csg after Drilling Cement in Top of Liner Held OK w/1000# Tested 5 1/2" Csg @ 9939' with 1500# PP After Drilling Cement Held OK 4-19-59.
Resume Completion Operations

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 <u>[Signature]</u>	Name <u>[Signature]</u>
Title _____	Position <u>Foreman</u>
Date _____	Company <u>Amerada Petroleum Corporation</u>