

Fischer
State A# 1

5 1/2 Egg
Top cement €8550



NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Tennessee Gas Transmission Company P. O. Box 1031 Midland, Texas
(Address)

LEASE State "A" WELL NO. 1 UNIT M S 20 T-16-S R-34-B

DATE WORK PERFORMED 5/7/57 POOL Undesignated

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.

Ran 2792.4' of 5-1/2" casing, N-80, 20#. Ran 8735.4' of 5-1/2" casing, N-80, 17#. Ran total of 11,527.6' of 5-1/2" OD casing w/Weatherford float shoe and float collar (total 11,537.3') set at 11,548 RDB. Cemented w/625 sx. Plug down at 8:45 AM 5/7/57. Released pressure and ran temperature survey after WOC 13 hours. Pressure tested casing to 1500 psi for 30 minutes after WOC 54 hours. Held OK.

where is cnt. top?
eg

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 E. Fischer

Name J. P. Schmalz

Title _____

Position Division Production Manager

Date _____

Company Tennessee Gas Transmission Company