

Well x 1

Beattie C. Dickenson

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EQUIPMENT: Supply "Pumping Record (3B-432-B)" or "Gas Lift Installation (3B-587)" Where Applicable							
Date	Item	Test Pres.	Make	Dwg. No.	Serial No.	Date Removed	Reason
	Tubing Head						
	Braden Head						
	Casing Head						
	Flow Line Size & Length		Wells in Same Line (Nos.)				
	Separator (Make)		Wells in Same Separator (Nos.)				
	Battery No.	Number and Size:	Wood	Capacity:	Steel	Capacity: Total	Capacity on Lease
	Wells in this Battery (By the Numbers)						

**IMPORTANT:** Compile in every applicable detail and forward **IMMEDIATELY** on completion of new well attached to the final "Daily Drilling or Remedial History" (3B-459). **OLD WELLS:** Where "Inhole" work is done, compile form in every applicable detail from time of original completion, including present work. All cumulative data **MUST** be included as space permits. Indicate pertinent information which cannot be covered in the body of the form in space below. Give condition "**BEFORE**" and "**AFTER**" on remedial operations. (The Accurate Compilation of the Record is Invaluable).

Above Correct—Signature\_\_\_\_\_

Title\_\_\_\_\_

Date \_\_\_\_\_

