

MISCELLANEOUS REPORTS ON WELLS

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

(Address)

LEASE State WELL NO. 1 UNIT P S 36 T 22 R 35
DATE WORK PERFORMED 5/2/57 POOL Jalmit

This is a Report of: (Check appropriate block)

☒ Results of Test of Casing Shut-off
5-1/2"

☐ Beginning Drilling Operations

☐ Remedial Work

□ Plugging

☐ Other

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

3880' of 5-1/2" 17# csg. set at 3885' and cemented w/200 sx. Tested 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 711-2-11

Title _____

Position Production Foreman

Date _____

Company Trice Production Company

Box 167 Midland, Texas