

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Amerada Petroleum Corporation - Box 706 - Eunice, New Mexico  
(Address)

LEASE E.W. Walden WELL NO. 5 UNIT L S 15 T 22-S R 37-E

DATE WORK PERFORMED \_\_\_\_\_ POOL Drinkard

This is a Report of: (Check appropriate block) ☐ Results of Test of Casing Shut-off  
☐ Beginning Drilling Operations ☐ Remedial Work  
☐ Plugging ☒ Other Temporary Abandon

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

**6495' TD - Temporary Abandon**

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 <u>B.A. Moore</u>	<u>Amerada Petroleum Corporation</u> (Company)	

OIL CONSERVATION COMMISSION

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

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

Name B.A. Moore  
Position Asst. Dist. Supt.  
Company Amerada Petroleum Corporation