

HOBBBS OFFICE OGC  
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 - Dunice, New Mexico  
(Address)

LEASE Ida Wimberley WELL NO. 6 UNIT F S 25 T 25-S R 37-E  
DATE WORK PERFORMED 8/13/58 POOL Justin Area - Undes.

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.  
**Spaced 17 1/2" hole @ 6:30 P.M. 8/13/58.**

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 <u>B. A. Moore</u>	Name <u>B. A. Moore</u>
Title _____	Position <u>Asst. Dist. Supt.</u>
Date _____	Company <u>Amerada Petroleum Corporation</u>