Registered Data Sheet Perforating System Evaluation, API RP 19B Section 1

API Form 19B-Section 1 ☐ Conforms to All Requirements of Section 1 ☐ Special Test - See Remarks/Exceptions below

Service Company _____ Explosive weight _____ gm, _____ powder, Case Material _____

Gun OD & Trade Name _____ Max Temp, °F _____ 1 hr _____ 3 hr _____ 24 hr _____ 100 hr _____ 200 hr

Charge Name _____ Maximum Pressure Rating _____ psi, Carrier Material _____

Manufacturer Charge Part No. _____ Date of Manufacture _____ Shot Density Tested _____ Shots/ft _____

Gun Type _____ Recommended Minimum ID for Running _____ in.

Phasing Tested _____ degrees, Firing Order: ____ Top down ____ Bottom up Available Firing Mode: _____ Selective _____ Simultaneous

Debris Description _____ Debris Weight _____ gm/charge, Debris _____ in^3/charge

Remarks/Exceptions per Section 1.11 _____

Casing Data _____ OD, Weight _____ lb/ft, API Grade, _____ Date of Section 1 Test _____

Target Data _____ OD, Amount of Cement _____ lb, Amount of Sand _____ lb, Amount of Water _____ lb.

Date of Compressive Strength Test _____ Briquette Compressive Strength _____ psi, Age of Target _____ days

Shot No.	No 1	No 2	No 3	No 4	No 5	No 6	No 7	No 8	No 9	No 10	No 11
Clearance, in.											
Casing Hole Diameter, Short Axis, in											
Casing Hole Diameter, Long Axis, in											
Average Casing Hole Diameter, in.											
Total Depth, in.											
Burr Height, in.											

Shot No.	No 12	No 13	No 14	No 15	No 16	No 17	No 18	No 19	No 20	No 21	No 22	Average
Clearance, in.												XXXXXX
Casing Hole Diameter, Short Axis, in												
Casing Hole Diameter, Long Axis, in												
Average Casing Hole Diameter, in.												
Total Depth, in.												
Burr Height, in.												

Remarks _____

Manufacturer's Certification

Type of Certification: _____ Self _____ Third Party

I certify that these tests were made according to the procedures as outlined in API 19B: Recommended Practice for Evaluation of Well Perforators, Second Edition, September 2006. All of the equipment used in these tests, such as the guns, jet charges detonator cord, etc., was standard equipment with our company for the use in the gun being tested and was not changed in any manner for the test. Furthermore, the equipment was chosen at random from stock and therefore will be substantially the same as the equipment that would be furnished to perforate a well for any operator. API neither endorses these tests nor recommends the use of the perforator system described.

_____ CERTIFIED BY _____ _____

_____ RECERTIFIED (Company Official) (Title) (Date) (Company) (Address)

Name of test as it should appear on website: _____

Name of test as it appears on application and application date: _____

Registered Data Sheet Perforating System Evaluation, API RP 19B Section 1

Service Company _____
Gun OD & Trade Name _____
Charge Name _____
Manufacturer Charge Part No. _____ Date of Manufacture _____
Gun Type _____
Phasing Tested _____ degrees, Firing Order: ____ Top down ____ Bottom up
Debris Description _____

Explosive weight _____ gm, _____ powder, Case Material _____
Max Temp, °F _____ 1 hr _____ 3 hr _____ 24 hr _____ 100 hr _____ 200 hr
Maximum Pressure Rating _____ psi, Carrier Material _____
Shot Density Tested _____ Shots/ft _____
Recommended Minimum ID for Running _____ in.
Available Firing Mode: _____ Selective _____ Simultaneous
Debris Weight _____ gm/charge, Debris _____ in^3/charge

Remarks/Exceptions per Section 1.11 _____

Casing Data _____ OD, Weight _____ lb/ft, API Grade, _____ Date of Section 1 Test _____
Target Data _____ OD, Amount of Cement _____ lb, Amount of Sand _____ lb, Amount of Water _____ lb.
Date of Compressive Strength Test _____ Briquette Compressive Strength _____ psi, Age of Target _____ days

Shot No.	No 23	No 24	No 25	No 26	No 27	No 28	No 29	No 30	No 31	No 32	No 33
Clearance, in.											
Casing Hole Diameter, Short Axis, in											
Casing Hole Diameter, Long Axis, in											
Average Casing Hole Diameter, in.											
Total Depth, in.											
Burr Height, in.											

Shot No.	No 34	No 35	No 36	No 37	No 38	No 39	No 40	No 41	No 42	No 43	No 44	Average
Clearance, in.												
Casing Hole Diameter, Short Axis, in												XXXXXXXX
Casing Hole Diameter, Long Axis, in												
Average Casing Hole Diameter, in.												
Total Depth, in.												
Burr Height, in.												

Remarks _____

Manufacturer's Certification

Type of Certification: _____ Self _____ Third Party

I certify that these tests were made according to the procedures as outlined in API 19B: Recommended Practice for Evaluation of Well Perforators, Second Edition, September 2006. All of the equipment used in these tests, such as the guns, jet charges detonator cord, etc., was standard equipment with our company for the use in the gun being tested and was not changed in any manner for the test. Furthermore, the equipment was chosen at random from stock and therefore will be substantially the same as the equipment that would be furnished to perforate a well for any operator. API neither endorses these tests nor recommends the use of the perforator system described.

_____ CERTIFIED BY _____ _____
_____ RECERTIFIED (Company Official) (Title) (Date) (Company) (Address)

Name of test as it should appear on website: _____

Name of test as it appears on application and application date: _____