



API Form 19B-Section 2

Service Company _____
Charge Name _____
Manufacturer Charge Part No. _____ Date of Manufacture _____
Gun Type _____
Available Firing Mode _____ Selective, _____ Simultaneous
Remarks _____

Explosive Weight _____ gm, _____ powder, Case Material _____
Max. Temp, °F _____ 1 hr _____ 3 hr _____ 24 hr _____ 100 hr _____ 200 hr
Maximum Pressure Rating _____ psi,

Table with columns: Shot No., No. 1, No. 2, No. 3, No. 4, No. 5, No. 6, Average. Rows: Faceplate Hole Diameter, Short Axis, in.; Faceplate Hole Diameter, Long Axis, in.; Average Faceplate Hole Diameter, in.; Total Depth, in.

MANUFACTURER'S CERTIFICATION

Type of Certification: _____ Self _____ Third Party

I certify that these tests were made according to the procedures as outlined in API RP 19B: Recommended Practices 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 test results 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: _____