NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, result of well repair, and other important operations, even though the work was witnessed by an agent of the Commission. See additional instructions in the Rules and Regulations of the Commission.

| instructions in the Rules and Regulations of t | | | | Jan Jan Grand Grand Goldminston. | oce additiona |
|---|---|--|---------------------------------|---|---------------|
| | Indicate Nature of Rep | ort by Checking | Below | | |
| REPORT ON BEGINNING DRILLING OPERATIONS | REPORT ON RESU OF CASING SHUT | LT OF TEST -OFF | x | REPORT ON REPAIRING WELL | |
| REPORT ON RESULT OF PLUGGING WELL | REPORT ON RECO | OMPLETION | | REPORT ON (Other) | |
| | Sept | ember 14, 1 | 954 | Hobbs, New M | xico |
| Following is a report on the work done | | | | (121 | ce) |
| Gulf Oil Corporation (Company or Operator) | | Harry Leonard "A" | | | |
| McVay and Stafford (Contractor) | | | | | |
| T 25-S , R 38-E , NMPM , Dolle | arhide-Drinkard | Pool, . | | Lea | County |
| The Dates of this work were as folows: | | | | | |
| | | | | | |
| Notice of intention to do the work (xxxx) (was | s not) submitted on Form | C-102 on | (Cro | oss out incorrect words) | , 19 |
| and approval of the proposed plan (was | | | | | |
| The Tall was | ACCOUNT OF WORK | | | | |
| with 300 sacks regular Neat Circulated approximately 12 After waiting over 24 hor There was no drop in pressur below easing shoe with 600# | sacks cement | Job complete B' casing want plug from There was | e 3:4 ith 1 om 32 no d | 5AM 9-10-54. 000# for 30 minutes. 0 to 350 Tested | |
| Witnessed by P. K. Parker (Name) | | Corporatio | o <u>n</u> | Drilling Forema | n |
| Approved: Of CONSERVATION COMM | IISSION | I hereby certify to the best of m | that the | e information given above is true ledge. | and complete |
| J. J. Stanley (Name) | | Name | <u>,</u> , | Jofo | ***** |
| (Months) | | Position | | ea Set. of Prod. | |
| (Titals) | *************************************** | Representing | | Lf 011 Corporation | |
| (Title) | (Date) | Address | Box | x 2167, Hobbs, New M | ex ico |