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ION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut-off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nati	ure of report by checking below:		
REPORT ON BEGINNING DRILLING OPERATIONS	REPORT ON REPAIRING W	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL	REPORT ON PULLING OR ALTERING CASING	OTHERWISE	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF	REPORT ON DEEPENING	WELL	
REPORT ON RESULT OF PLUGGING OF WELL			
	Hobbs, New Mexico	April 15, 1936	
OIL CONSERVATION COMMISSION, Santa Fe, New Mexico.	Place	Date	
Gentlemen:			
Following is a report on the work done and the result. Shelly Ctl Company	s obtained under the heading noted a	bove at the	
Company or Operator	T.ease	Well No in the	
CST/4.ST/4 of Sec. 25	, T, R.	56 N. M. P. M.	
Field,	Lei	Commute.	
The dates of this work were as follows: APril 11	TASE		
Notice of intention to do the work was (subn	nitted on Form C-102 on	19 36	
and approval of the proposed plan was (ained. (Cross out incorrect words.)		
	VORK DONE AND RESULTS OF		
pumping acid in 2-1/2" tubing pressure and 500f casing pressure on tubing dropped to 1000f. Le pressure on esg. Still seabbing		-	
pressure on esg. Still weabbin	ne. A7		
Vitnessed by		E	
	Devideon Drilling Comp Company		
Subscribed and sworn to before me this		Poreman Title	
Subscribed and sworn to before me this	I hereby swear or affirm that is true and correct.	Poreman Title	
Anall	I hereby swear or affirm that is true and correct.	the information given above	
day of April , 19	I hereby swear or affirm that is true and correct. Name Position Position Name	the information given above	
Anall	I hereby swear or affirm that is true and correct. Name Position District Super Representing Skelly Gil	the information given above	
day of April , 19	I hereby swear or affirm that is true and correct. Name Position District Super Representing Skelly Gil	the information given above	
day of April , 19 alreice Double Notary Public	I hereby swear or affirm that is true and correct. Name Position District Super Representing Skelly Gil	the information given above the information given above intendent Company Impany or Operator Intendent Company Impany or Operator Intendent	
day of April , 19 alrectice Double Notary Public My Commission expires Cottober 24, 1939	I hereby swear or affirm that is true and correct. Name Position District Super Representing Skelly Gil	the information given above intendent 9. Company ompany or Operator	

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