Form C-103

OIL CONSERVATION COMMISSION
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 nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL	X		

___May 5th 1950.___   ___Wagon Mound, N. M.___
Date   Place

OIL CONSERVATION COMMISSION,
SANTA FE, NEW MEXICO.
Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the_____

___H. J. Cox___   ___C. F. Kruse___ ____Well No. _1_ ____in the
Company or Operator   Lease

_____of Sec. __11__, T.__19 N__, R.__21 E__, N. M. P. M.,
____Mora____ County.

_____Field _____

The dates of this work were as follows: ___May 2, 3 and 4th___

Notice of intention to do the work was (was not) submitted on Form C-102 on____May 1st____ 19_50_

and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

656 feet 40 sacks cement on wooden plug at bottom and 40 sacks cement 20 feet from top of well on top of 20 feet wooden plug. Well pumped full of mud from top to bottom, perfect plug.

Witnessed by _____
Name   Company   Title

Subscribed and sworn before me this____5th____

____day of__May__, 19_50_

_____
Notary Public

I hereby swear or affirm that the information given above is true and correct

Name _____

Position _____

Representing _____
Company or Operator

My commission expires_____ Address _____

Remarks:

_____
Name

_____
Title