

NEW MEXICO OIL CONSERVATION COMMISSION
 Santa, Fe, New Mexico

MISCELLANEOUS NOTICES

Submit this notice in triplicate to the Oil Conservation Commission or its proper agent before the work specified is to begin. A copy will be returned to the sender on which will be given the approval, with any modifications considered advisable, or the rejection by the Commission or agent, of the plan submitted. The plan as approved should be followed, and work should not begin until approval is obtained. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of notice by checking below:

NOTICE OF INTENTION TO TEST CASING SHUT-OFF		NOTICE OF INTENTION TO TEST CHEMICALLY TREAT WELL	<input checked="" type="checkbox"/>
NOTICE OF INTENTION TO CHANGE PLANS		NOTICE OF INTENTION TO PULL OR OTHERWISE ALTER CASING	
NOTICE OF INTENTION TO REPAIR WELL		NOTICE OF INTENTION TO PLUG WELL	
NOTICE OF INTENTION TO DEEPEN WELL			

Hobbs, New Mexico

June 29, 1938

Place

Date

OIL CONSERVATION COMMISSION,
 Santa Fe, New Mexico.

Gentlemen:

Following is a notice of intention to do certain work as described below at the

Repollo Oil Company State # 196 Well No. 2 in W/2SW/4
Company or Operator Lease
 of Sec. 32, T. 20S, R. 37E, N. M. P. M., Bunice Field,
Log County.

DUPLICATE

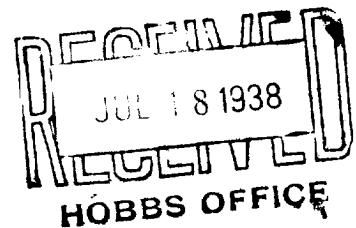
FULL DETAILS OF PROPOSED PLAN OF WORK

FOLLOW INSTRUCTIONS IN THE RULES AND REGULATIONS OF THE COMMISSION

To chemically treat well W/ 2000 Gallon Dowell "XR" Acid on June 29th

Present production- hole fills 200' everyhour W/ fluid

Formation to be treated- Lime
 Depth to be treated- 3800 to 3861
 Inner string casing 7"OD @ 3732'
 Formation packer @ 3788'
 Purpose of treatment- increase production



Approved JUL 18 1938, 19____, except as follows:

Repollo Oil Company
Company or Operator

By F. Brett

Position FOREMAN
 Send communications regarding well to

Name F. Brett

Address Hobbs, N.M.

OIL CONSERVATION COMMISSION,
 By Rosa Wilkes R.M.
 Title Oil & Gas Inspector

REPUBLIC OF THE PHILIPPINES
Department of Education

REGIONAL OFFICE - CALABARZON

Division Office - Cavite

Office Memorandum

TO: [Name]

FROM: [Name]

SUBJECT: [Subject]

[Detailed body text of the memorandum, including dates, times, and specific instructions or information.]

ATTACHMENT

[Detailed description of the attachment, including its purpose and any relevant details.]

[Additional text or notes related to the memorandum or attachment.]

REMARKS

[Remarks or comments regarding the memorandum or its implementation.]