

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	X	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			

Artesia, New Mexico

Oct. 4, 1945

Place

Date

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

Southern Union Gas Co.

Ocho state

Well No. 10 in the

Company or Operator

Lease

NE 1/4

of Sec.

31

T.

170

R.

282

N. M. P. M.,

Empire

Field,

Eddy

County.

The dates of this work were as follows:

October 3, 1945

Notice of intention to do the work was (was not) submitted on Form C-102 on

Oct. 2

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

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

This well was shot by New Mexico Nitro Co. w/ 70 quarts of solidified from 1740 to 1775 feet, and with 200 quarts of solidifier from 1775 to 1827 feet.

Witnessed by _____ Name _____ Company _____ Title _____

Subscribed and sworn before me this _____

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

_____ day of _____, 19 _____

Name _____

Position _____

Notary Public

Representing _____

Company or Operator

My commission expires _____

Address _____

Remarks:

APPROVED: 10-3-45

Name _____

Title _____

