

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.

Indicate Nature of Report by Checking Below

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other) <b>Hydrafrac</b>	<b>X</b>

**3/24/53**

(Date)

**Artesia, New Mexico**

(Place)

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

**American Republics Corporation**  
(Company or Operator)

**Yates**  
(Lease)

**Western**

(Contractor)

, Well No. **5** in the **SW**  $\frac{1}{4}$  **NE**  $\frac{1}{4}$  of Sec. **33**

T. **17S**, R. **28E**, NMPM., **Artesia** Pool, **Eddy** County.

The Dates of this work were as follows: **January 26, 1953**

Notice of intention to do the work (was) ~~XXXX~~ submitted on Form C-102 on **January 17**, 19**53**  
(Cross out incorrect words)

and approval of the proposed plan (was) ~~XXXX~~ obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

**3000 gallons hydrafrac pumped in at 1400 pounds. Well's production has not stabilized yet but appears that it might settle at about 15 barrels or less per day.**

Witnessed by.....  
(Name) (Company) (Title)

Approved: **OIL CONSERVATION COMMISSION**

**P. A. J. Jackson**  
(Name)

I hereby certify that the information given above is true and complete to the best of my knowledge.

Name..... **Cashaid**

Position..... **Dist. Supt.**

Representing..... **American Republics Corporation**

Address..... **P. O. Box 547, Artesia, New Mexico**

(Title)

(Date)