

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

Oil Cons. Comm.  
ARTESIA OFFICE

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>SANDBRAC</b>	

**JULY 12, 1955**  
(Date)

**ARTESIA, NEW MEXICO**  
(Place)

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

**W. C. WELCH**

**MRY STATE**

(Company or Operator)

(Lease)

**W. C. WELCH**  
(Contractor)

Well No. **2** in the **SW**  $\frac{1}{4}$  **NE**  $\frac{1}{4}$  of Sec. **35**

T. **17S**, R. **28E**, NMPM., **UNDESIGNATED** Pool, **EDDY** County.

The Dates of this work were as follows: **JULY 8TH, 1955**

Notice of intention to do the work (was) (was not) submitted on Form C-102 on \_\_\_\_\_, 19\_\_\_\_, (Cross out incorrect words)

and approval of the proposed plan (was) (was not) obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

**DOWELL, INCORPORATED DID SANDBRAC JOB ON THE ABOVE WELL ON JULY 8TH, 1955. TREATED SECTION FROM 2337 TO 2375 WITH 10,000 GALLONS OF OIL AND 30,000# OF SAND. INCREASED PRODUCTION FROM 5 TO 50 BARRELS OF OIL PER 24 HOURS.**

Witnessed by \_\_\_\_\_ **W. C. WELCH** \_\_\_\_\_  
(Name) (Company) (Title)

Approved: \_\_\_\_\_  
OIL CONSERVATION COMMISSION

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

Name \_\_\_\_\_ **W. C. WELCH** \_\_\_\_\_  
Position \_\_\_\_\_ **AGENT** \_\_\_\_\_

Representing \_\_\_\_\_ **W. C. WELCH** \_\_\_\_\_  
Address \_\_\_\_\_ **Box 564, ARTESIA, NEW MEXICO.**

\_\_\_\_\_ **JUL 19 1955** \_\_\_\_\_  
(Title) (Date)