

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			

_____ Place _____ Date _____

OIL CONSERVATION COMMISSION,
Gentlemen:

SANTA FE, NEW MEXICO.

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

_____ Well No. _____ in the
 _____ Company or Operator _____ Lease
 _____ of Sec. 36, T. 17, R. 30, N. M. P. M.,
 _____ Field, _____ County.

The dates of this work were as follows: _____

Notice of intention to do the work was (~~was not~~) submitted on Form C-102 on _____, 1915

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

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

A 50' 12" casing cemented with 50' of 12" Portland
 cement plug. Plug was drilled on October 1915. No water
 appeared in the hole. Drilling was resumed.

Witnessed by _____ Name _____ Company _____ Title _____

Subscribed and sworn before me this _____

_____ day of _____, 19_____

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

Name (signed) _____

Position _____

Representing _____
 Company or Operator

My commission expires _____
 Notary Public

Address _____

Remarks:

 Name

 Title