

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 | | | |

8/16/48

Artesia, New Mexico

Date

Place

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 _____

Collier & Bassett

Twin Lakes

Well No. 7

in the _____

Company or Operator

Lease

SW 1/4

of Sec. 28

T. 18S

R. 28E

N. M. P. M.,

Artesia

Field,

Eddy

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 _____ 19____

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

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Changed operators as of June 1, 1948. Well was formerly known as
Eastland Oil Company Twin Lakes #7.

Witnessed by _____ Name _____ Company _____ Title _____

Subscribed and sworn before me this _____

19 _____

day of _____

August _____

19 48

E. H. McGuire

Notary Public

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

Name _____

Position _____

Representing _____

Company or Operator

My commission expires _____

4-22-50

Address _____

Remarks:

Name _____
ARTESIA REPRESENTATIVE
Title _____