Form C-103
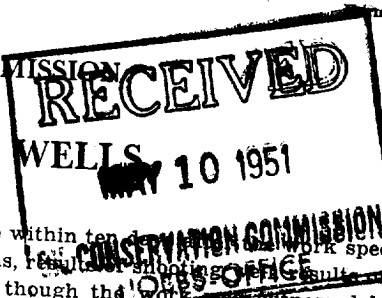
NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

Submit this report in triplicate to the Oil Conservation Commission District Office within ten days after the work specified is completed. It should be signed and filed as a report on beginning drilling operations, result of shooting, result 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. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERATIONS	X	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			

May 5, 1951   Monument, New Mexico
_____Date_____   _____Place_____

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

Amerada Petroleum Corporation   State EC "A"   Well No.   1   in the
_____Company or Operator_____   _____Lease_____

C/NE/4 NW/4 of Sec. 14, T 12-S, R 32-E, N. M. P. M.,

Wildcat Pool   Lea County.

The dates of this work were as follows: May 5, 1951

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

Spudded 17-1/2" hole at 7:30 A.M., 5-5-51.

Witnessed by K. V. Stephenson   Amerada Petroleum Corporation   Foreman
_____Name_____   _____Company_____   _____Title_____

APPROVED:
OIL CONSERVATION COMMISSION

Roy Yurkovich
_____Name_____
Oil & Gas Inspector
_____Title_____

MAY 10 1951 , 19___
_____Date_____

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

Name _____

Position Assistant District Superintendent

Representing Amerada Petroleum Corporation
_____Company or Operator_____

Address Drawer D, Monument, New Mexico

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