

DUPLICATE

## OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

## MISCELLANEOUS REPORTS ON WELLS

RECEIVED  
OCT 16 1946  
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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	<b>X</b>	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

P. O. Box 191

Lubbock, Texas

10-8-46

Date

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

Great Western Producers, Inc. State NM Well No. 2 in the  
Company or Operator LeaseNE/SW of Sec. 12, T. 13 S, R. 31 E, N. M. P. M.,  
Caprock Field, Chaves County.The dates of this work were as follows: 10-8-46Notice of intention to do the work was (was not) submitted on Form C-102 on October 7 1946  
and approval of the proposed plan was ~~not~~ obtained. (Cross out incorrect words.)

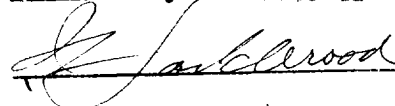
## DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Set 315' of 8-5/8" Casing for surface pipe.

Cemented with 150 Sacks cement.

Casing shut-off tested O. K. and drilling resumed.

Witnessed by \_\_\_\_\_ Name \_\_\_\_\_ Company \_\_\_\_\_ Title \_\_\_\_\_

Subscribed and sworn before me this 8-thday of October, 1946

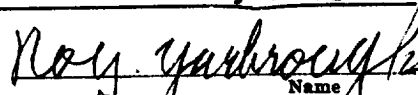
Notary Public

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

Name R. E. DeKloofPosition Production SuperintendentRepresenting Great Western Producers, Inc.  
Company or OperatorMy commission expires 7-1-46Address P. O. Box 191 Lubbock, Texas

Remarks:

APPROVED

Date OCT 16 1946
  
 Name \_\_\_\_\_  
 Oil & Gas Inspector  
 Title \_\_\_\_\_

Circumstance	Justified (%)	Not justified (%)
If someone is attacking you	85	15
If someone is threatening you	75	25
If someone is harassing you	65	35
If someone is insulting you	45	55
If someone is annoying you	15	85

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*Journal of Management Studies*, 19(6), 709-728.

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