NEW MELLICO 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, 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. See additional instructions in the Rules and Regulations of the Commission.

| agent of the Commission. | | | rt by checking below | | ommission. | | | |
|--|---------------------------------------|---|---------------------------------------|-----------------|--------------|--|-----------|--|
| REPORT ON BEGINNING OPERATIONS | | REPORT ON REPAIRING WELL REPORT ON PULLING OR OTHERWISE ALTERING CASING | | | | | | |
| REPORT ON RESULT OF S CHEMICAL TREATME | X | | | | | | | |
| REPORT ON RESULT OF SHUT-OFF | | REPORT ON D | EEPENI | NG WELL | | | | |
| REPORT ON RESULT OF | PLUGGING OF WELL | | | | , | | | |
| | November 2 | 9, 195 |] Date | M | idland, | Texas | | |
| Following is a report on the | work done and the result | s obtained ı | inder the heading no | ted above | at the | ······································ | ···· | |
| The Texas Compa | ny State of Ne | w Mexi | co "AC" NCT. | 1 Well N | o | 2 | in the | |
| SW/4 NW/4 Compar | of Sec | 3 | , т. 15 - S | , R | 33 -E | , N. 1 | 1. P. M., | |
| Saunders | Pool | | Lea | | | | County. | |
| The dates of this work were | as follows: See | Below | | | | | | |
| Notice of intention to do the | | | | | | | | |
| and approval of the proposed | | | | | | , | | |
| | TAILED ACCOUNT OF | | | | INED | | | |
| | TD: 9 | 900! - | Lime | | | | | |
| Acidized thru can Chemical Co. act well flowed 260 32/64" choke. | id on ll-9-51. bbls fluid le | On 1. | 4 hour Offic | cial T | est end | ing ll | -12-5 | |
| | | | | | | | | |
| Vitnessed byName | | | Company | | | Title | | |
| APPROVED: OIL CONSERVAT | rion commission MOUY Name | | I hereby swear or is true and corpect | MA | lufa | ć | | |
| Jus com | Title | | Position Asst The | _ | _ | | | |
| 7000 | · · · · · · · · · · · · · · · · · · · | 19 | Representing The | | • • | | | |
| Da | ite | | Address Bo 12 | | idiand, | T ex 32 | | |