Amerada Petroleum Corperation

Address Drawer D, Monument, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is comon Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, p re in

pleted. It should be signed and filed as a result of well repair, and other import instructions in the Rules and Regulatio	ant operations, even though the	erations, Results of te work was witnessed b	st of casing snut-on, result of by an agent of the Commissio	n. See additional
instructions in the Rules and Regulation	Indicate Nature of Repo	ort by Checking Belo	w	
REPORT ON BEGINNING DRILLING OPERATIONS	REPORT ON RESUL	LT OF TEST X	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL	REPORT ON RECO	MPLETION	REPORT ON (Other)	
	March 3	0, 1953	Monument, Ne	Wexico
Following is a report on the wor	ζ_ ===,	under the heading no	ted above at the	
	amat t en		State ST"A"	
Amerada Petroleum Cerperation (Company or Operator)			(Lesse)	
Keble Drilling Corpers	tion	, Well No	in the NW/1/4 NW/1/	4 of Sec
(Contract	Undesignated		Lea	County.
Т, R.Д., NМРМ.,		04 1052		
The Dates of this work were as follows:	March	28, 1973	***************************************	
Notice of intention to do the work				
			(Cross out incorrect weeks,	
and approval of the proposed plan		- CONTRACTOR DESCRIP	TE ORTAINED	
	AILED ACCOUNT OF WORK			
Ran 110 at : Ran 85.	Schlumberger's Electric Schlumberger's Electric Jts of \$-5/8" OD case 2:30 PM, 3/26/53. Her Temperature Survey - 1% Fill - After WOC 2:1ling cement - No presented drilling formatic	rical and Gaming set @ 4674 x press. 1400# Top of coment 4 hours, teste	W/2000 Sx. Pumped. Cement did not di outside 8-5/8" casi d casing W/1000# bei	l plug to 4584 reulate - ing @ 561', er fere and after 4584' to 4674
Witnessed by		Petroleum Corp	oration (Title)	oreman -
Approved: OIL CONSERVA	ON COMMISSION	I hereby certify the to the best of my	at the information given above knowledge.	is true and complete
DAL 111.41.6	A 111.6	Name	DON 10pp	D
THE YEAR	mie)	Position Assis	tant District Super	intendent

(Date)