

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELL

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-offs, 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	X	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

Hobbs, New Mexico

September 25, 1941

OIL CONSERVATION COMMISSION,
Santa Fe, New Mexico.

Place

Date

Gentlemen:

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

Continental Oil Company

State I-16

Well No. 1

in the

COMPANY OR OPERATOR

NE/4

of Sec.

16

T.

LEASE
18-S

R.

35-E

N. M. P. M.,

Vacuum

Field,

Lea

County

The dates of this work were as follows: April 3, 1938 & April 6, 1938

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

After cement had been allowed to set 72 hours in 9-5/8" casing, casing was tested with 1200# pressure for 30 minutes both before and after drilling plug. Casing tested OK.

Witnessed by E. H. Payne

Shell

Name

Company

Title

Subscribed and sworn to before me this 25th

day of September, 19 41

J. A. McConville
Notary Public

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

Name

Position Asst. Dist. Supt.

Representing Continental Oil Company

Company or Operator

My Commission expires 4-26-45

Address Box 66, Hobbs, N.M.

Remarks:

Name

W. A. GAS INJECTION

Title