OFFICE OF THE STATE GEOLOG.__ſ

SANTA FE, NEW MEXICO

MISCELLANEOUS REPORTS ON WELLS

Submit this report in duplicate to the State Geologist or proper Oil and Gas Inspector 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 water shut-off, result of abandonment of well, and other important operations, even though the work was witnessed by the State Geologist or Oil and Gas Inspector. Reports on minor operations need not be signed and sworn to before a notary public, but such operations should be witnessed by an Oil and Gas inspector if possible.

Indicate nature of report by checking below: REPORT ON BEGINNING DRIRLLING OPERATIONS REPORT ON DEEPENING WELL REPORT ON PULLING OR OTHERWISE ALTERING CASING REPORT ON RESULT OF SHOOTING WELL REPORT ON RESULT OF TEST OF WATER SHUT-OFF REPORT ON REPAIRING WELL x REPORT ON RESULT OF ABANDONMENT OF WELL Hobbs N.M. 8-4-35 Place Date E.H. Wells Mr __State Geologist, Santa Fe, N. Mex. Following is a report on the work done and the results obtained under the heading noted above at Continent at 1 011 Co. State B-13 Well No. 2 in the State B-13 __Well No_____in the Company or Operat _. T_ 18S R 37-R N. M. P. M., of Sec_ Hob bs Oil Field, County. 8-3-35 The dates of this work were as follows: Notice of intention to do the work was (was not) sumbitted on Form SG_ on _19____, and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.) DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED 13"0.D. Casing set at 268' in Redbeds on August 3rd, 1935, comented with 200 sacks, After allowaing coment to set 36 Hours plug was drilled to bot tom of pipe, and hole bailed dry and allowed to stand 2 hrs tested dry. Test witnessed by Company Representative and Shell Pet. Corpn Representative. Subscribed and sworn to before me this I hereby swear or affirm that the information given above is true and correct. __ ,19___ _day of_ Name_ Position_ Representing. Notary Public P.O.Box CC Hobbs N.M. Address My Commission expires. Remarks: Name Title

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