Form SG 106

NEW MEXICO STATE LAND OFFICE
OFFICE OF THE STATE GEOLOGIST
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 DRILLING OPERATIONS	X	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF SHOOTING WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF WATER SHUT-OFF		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF ABANDONMENT OF WELL			

Hobbs, N.M. (PLACE) 2-3-33 (DATE)

Mr. E.H.Wells State Geologist,
Santa Fe, N. Mex.

Following is a report on the work done and the results obtained under the heading noted above at the Continental Oil Company (COMPANY OR OPERATOR) State B 25 (LEASE) Well No. 1 in the NE 1/4 of NW 1/4 of Sec. 25, T. 18South, R. 37 East, N. M. P. M., Hobbs Oil Field, Lea County.

The dates of this work were as follows: January 29-1933

Notice of intention to do the work was (was not) submitted on Form SG 101 on Jan. 22-, 19 33., and approval of the proposed plan was (~~was not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

There have been no changes in the proposed plan of drilling or casing Program, as reported on Form SG 101.

A spudding machine was moved in and drilling commenced on January 29, 1933.

DUPLICATE

Subscribed and sworn to before me this 10th day of Feby, 1933

(NOTARY PUBLIC)

My commission expires July 2nd 1933

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

Name [signature]

Position District Superintendent

Representing Continental Oil Company (COMPANY OR OPERATOR)

Address Box 66 Hobbs, N.M.

Remarks:

APPROVED AS O. K.
[signature]