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.

inspector if possible. Indicate nature of	f report by checking below:
REPORT ON BEGINNING DRIRLLING OPERATIONS	
REPORT ON RESULT OF SHOOTING WELL	REPORT ON DEEPENING WELL REPORT ON PULLING OR OTHERWISE
REP()RT ON RESULT OF TEST OF WATER	REPORT ON PULLING OR OTHERWISE ALTERING CASING
REPORT ON RESULT OF ABANDONMENT	REPORT ON REPAIRING WELL
	Hobbs, New Mex March 24, 1935.
NB 1, NW 2 of Sec 24 Hobbs Oil Field, The dates of this work were as follows: Notice of intention to do the work was (the results obtained under the heading noted above at Well No 2 in the N. M. P. M., Lea County.
DETAILED ACCOUNT OF WOR Casing and well head con ress. for 15 min. Plug was then	K DONE AND RESULTS OBTAINED nmections were tested with 600# drilled and W. S. O. tested for 15 mi
DETAILED ACCOUNT OF WOR Casing and well head compress. for 15 min. Plug was then	K DONE AND RESULTS OBTAINED nmections were tested with 600# drilled and W. S. O. tested for 15 mi
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DETAILED ACCOUNT OF WOR Casing and well head compress. for 15 min. Plug was then	I hereby swear or affirm that the information given above is true and correct.
DETAILED ACCOUNT OF WOR Casing and well head compress. for 15 min. Plug was then with 1000# press. Test approved. Subscribed and sworn to before me this	I hereby swear or affirm that the information given above is true and correct. Name Position District Engineer
DETAILED ACCOUNT OF WOR Casing and well head compress. for 15 min. Plug was then with 1000# press. Test approved. Subscribed and sworn to before me this day of	I hereby swear or affirm that the information given above is true and correct. Name Position Results Obtained With 600# And W. S. O. tested for 15 mi

Name

Title

OFFICE OF THE STATE GEOLOGIST

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