

## 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:

		PLACE	DATE
		Hooss, i.i.	Jarch 20,1933
REPORT ON RESULT OF ABANDONMENT OF WELL			
REPORT ON RESULT OF TEST OF WATER SHUT-OFF	X	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING WELL		REPORT ON PULLING ALTERING CASING	OR OTHERWISE
REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON DEEPENIN	

Mr. \_\_\_\_\_ A. \_\_\_\_\_State Geologist,

Santa Fe, N. Mex.

Following is	a report on the work do	one and the resul	ts obtained und	der the heading	noted above at the
illerate 1	>a.t. <u>(0.73)</u>		<u>oon M</u>	rain_Well No	in the
NA, of 344	company or operator of Sec	<u>16</u> , T.	LEASE 155	, R. <u>30e</u>	
	Oil Fie			_	
	this work were as follow			-	······

Notice of intention to do the work was (was most) submitted on Form SG105 on <u>largen 1551</u>, 19<u>33</u>, and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.)

## DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

1200: pressure was placed on the 7" casing before and after willing canent plug.

The casing call cosing sect tested o.k.

and the second second

Subscribed and sworn to before me this
23 day of March, 1937.
Bernard m Stal glille
NOTARY PUBLIC.
My commission expires Que . 21, 1934

given abo	ve is true and corre	ect.
Name	is true and correction	¥
Position	field foreven L	/
Represent	ingler .a e	Jerp.
Address	.jobje,	COMPANY OR OPERATOR.

I hereby swear or affirm that the information

Remarks:

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Allen	124

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