## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

MODDS OFFICE COC

## MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well,

| result of well repair, and o<br>instructions in the Rules an | d Regulations of the                   |                      |   | by an agent of the Commission. See  | additiona              |
|--|--|----------------------|---|---|------------------------|
| REPORT ON BEGINNING<br>DRILLING OPERATION                    |  | REPORT ON RESU       |   | REPORT ON REPAIRING WELL  |                        |
| REPORT ON RESULT<br>OF PLUGGING WELL                         |  | REPORT ON RECO       | OMPLETION                                     | REPORT ON Installing (Other) Pumping Equip.   | x                      |
|  |  | Marc<br>(Date)       | h 11, 1955                                    | Hebbs, New Mexi   | .00                    |
| Following is a report  |  |                      | •   |   |                        |
| Golf (C  | ompany or Operator)                    | <b>n</b>             |   | W. D. Grimes (North)  | •                      |
| Clarke   | Oll Well Serv                          | icing, Inc.          | , Well No                                     | in the 1/4 Sta  | 21                     |
| T. <b>18-3</b> , R. <b>38-E</b> , N                          | MPM.,                                  | Hobbs                | Pool,   | Les   | County                 |
| The Dates of this work were                                  | as folows:                             | Janu                 | ary 21 thru Fe                                | bemary 20, 1955   | ··                     |
| Notice of intention to do the                                | e work (was) (****                     | t) submitted on Form | C-102 on                                      | (Cross out incorrect words)   | <b>,</b> 19. <b>55</b> |
| and approval of the propose                                  |  |                      |   | (Cross out incorrect words)   |                        |
|  | DETAILED AC                            | COUNT OF WORK        | DONE AND RESUI                                | LTS OBTAINED  |                        |
| Pulled 2=3/8" t  | ubing and flo                          | w <b>valves.</b> Ran | 3-1/2" tubing                                 | , rods and pump.  |                        |
|  | . <del>-</del>                         |                      | · · ·   | 23 vara arm hamba   |                        |
| Pumped 44 bbls   | 011, 595 bbls                          | water in 24, n       | ours,   |   |                        |
|  |  |                      |   |   |                        |
|  |  |                      |   |   |                        |
|  |  |                      |   |   |                        |
|  |  |                      |   |   |                        |
|  |  |                      |   |   |                        |
|  |  |                      |   |   |                        |
| Witnessed by   | B. Jordan (Name)                       | Gulf 011             | Corporation (Company)                         | Field Forman  | ••••                   |
| Approved: OIL CONSE  | RVATION COMMIS                         | SSION                | I hereby certify that<br>to the best of my ki | t the information given above is true and nowledge.   | i complete             |
| O. Y Stan  | rley                                   |                      | Name  | + Jayer   |                        |
|  | (Name)                                 |                      | Position                                      | res Supt. of Prod.  |                        |
| (79410)  | ······································ |                      |   | blf 011 Corporation<br>bx 2167. Hobbs. N. M.  |                        |
| (Title)  |  | (Date)               | Address                                       | NAME OF THE PARTY OF THE STATE |                        |

(Title)