

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 REPORT ON RESULT OF SHOOTING WELL REPORT ON RESULT OF TEST OF WATER SHUT-OFF REPORT ON RESULT OF ABANDONMENT OF WELL	REPORT ON DEEPENING WELL REPORT ON PULLING OR OTHERWISE ALTERING CASING REPORT ON REPAIRING WELL Report of Acid Treatment X
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Mr. **E.H. Wells** State Geologist, **Hobbs N. Mexico** **9-10-34**
 Santa Fe, N. Mex. PLACE DATE

Following is a report on the work done and the results obtained under the heading noted above at the **Continental Oil Co.** State **A-33** Well No. **3** in the **SW 1/4** COMPANY OR OPERATOR **33** T. **18S** LEASE **38E** of Sec. **33**, R. **38E**, N. M. P. M., **Hobbs** Oil Field, **Lea** County. **8-23-34**

The dates of this work were as follows: **8-21-34** Notice of intention to do the work was (~~was not~~) submitted on Form SG **105** on **8-21-34**, 19____, and approval of the proposed plan was (~~was not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

State A-33 # 3 Was Treated on 8-23-34 with 1500 gallons of Dow X Acid by Dowell Inc. to correct gas-oil ratio. 70 bbls oil pumped in ahead of acid, 50 bbls behind acid. Maximum Casing Pressure 1200# Maximum Tubing pressure 1340# , pressures remained the same while pumping in acid and oil load.

Gas-Oil ratio Before treating 9000 to 1 .
 Gas-Oil Ratio After treatment 17000 to 1.

DUPLICATE

Subscribed and sworn to before me this _____ day of _____, 19____.

NOTARY PUBLIC.

My commission expires _____

Remarks:

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

Name _____
 Position **District Supt.**
 Representing **Continental Oil Co.**
 Address **Box 66 Hobbs N. Mexico**

NAME

TITLE