II.





Sumbit this report in triplicate to the Oil Conservation Commission or its proper agent within tender attaited work be 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 casing shut off, result of plugging of well, and other to be to be to be signed and sworn to be commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERA- TIONS		
	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEM- ICAL TREATMENT OF WELL	REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL		
August 11, 1	948 Midland, Texas Date Place	
OIL CONSERVATION COMMISSION, SANTA FE, NEW MEXICO. Gentlemen:		
Following is a report on the work done and the results ob	tained under the heading noted above at the	
The Texas Company's State of New		
Company or Operator	Lease	
	_, T17-S, R34-E, N. M.	P. M.
	68 CC	
		Junty.
The dates of this work were as follows: 8-11-48		
Notice of intention to do the work was (resource) subm	itted on Form C-102 on <u>8-9-48</u> 19	
and approval of the proposed plan was (was not) obtain		
DETAILED ACCOUNT OF WOR	K DONE AND RESULTS OBTAINED	
TD: 4	540 Lime	
completed 9:00 P.M. 8-9-48.		
Drilled plug at 9:30 PM 8-11-48. with 1000#. Tested OK.	Tested casing before and after	
with 1000#. Tested OK.	Tested casing before and after	
	Tested casing before and after Company Title	
Witnessed by	Company Title I hereby swear or affirm that the information given is true and correct.	
With 1000#. Tested OK.	Company Title I hereby swear or affirm that the information given is true and correct.	
with 1000#. Tested OK. Witnessed by	Company Title I hereby swear or affirm that the information given is true and correct. Image: Company of the information given is true and correct. Name Image: Company of the information given is true and correct. Name Image: Company of the information given is true and correct. Position District Superintendent Image: Company of the information given is true and correct.	
Witnessed by	CompanyTitleI hereby swear or affirm that the information given is true and correct.NameNameMaxwell	
with 1000#. Tested OK. Witnessed by	Company Title I hereby swear or affirm that the information given is true and correct. Image: Company of the second s	
with 1000#. Tested OK. Witnessed by	Company Title I hereby swear or affirm that the information given is true and correct. Image: Structure Name Image: Structure Name Image: Structure Position District Superintendent Representing The Texas Company or Openpany Address Box 1270, Midland, Texas Mathematical Superintendent Name	
with 1000#. Tested OK. Witnessed by	Company Title I hereby swear or affirm that the information given is true and correct. Image: Structure Name Image: Structure Name Image: Structure Position District Superintendent Representing The Texas Company or Openpany Address Box 1270, Midland, Texas Mathematical Superintendent Name	above