

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELL

Submit this report in triplicate to the Oil Conservation Commission or its proper agent 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 casing shut-offs, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the 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 OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL	X	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			

Hobbs, New Mexico

Place

December 12, 1938

Date

OIL CONSERVATION COMMISSION,
Santa Fe, New Mexico.

DUPLICATE

Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the

Shell Petroleum Corporation State "N" Well No. 1 in the
COMPANY OR OPERATOR LEASE

NE/4 NE/4 of Sec. 28, T. 17S, R. 35E, N. M. P. M.,
Vacuum Field, Lma County

The dates of this work were as follows: 12-11-38

Notice of intention to do the work was (was not) submitted on Form C-102 on 12-10 19 38
and approval of the proposed plan was (~~was not~~) obtained. (Cross out incorrect words)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Treated well with 3000 gallons Halliburton acid. Well
flowed 56 barrels of oil in 8 hours through open 2 inch tubing after
treating. Would not flow before treating.

Witnessed by _____ Name _____ Company _____ Title _____

Subscribed and sworn to before me this _____

13 day of Dec, 1938
[Signature]
Notary Public

My Commission expires Dec 13 1941

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

Name Dr. J. J. [Signature]Position Dist. Supt.Representing Shell Pet. Corp.
Company or OperatorAddress Dr. #1457 Hobbs, N.M.

Remarks:

[Signature]
Name _____
OIL & GAS INSPECTOR
Title _____