

## 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		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		Report on Results of Plugging Back Well	<b>X</b>

Midland, Texas, September 29th, 1939

Place

Date

OIL CONSERVATION COMMISSION,  
Santa Fe, New Mexico.

Gentlemen:

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

**The Texas Company's State of N.M. "J"**Well No. **2** in the

Company or Operator

Lease

**SE $\frac{1}{4}$  of SW $\frac{1}{4}$** of Sec. **24**T. **19-S**R. **36-E**

N. M. P. M.,

**Monument**

Field,

**Lea**

County

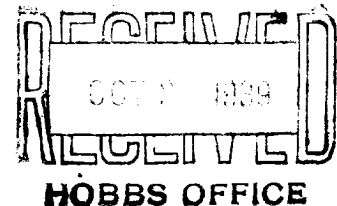
The dates of this work were as follows: **See Below**

Notice of intention to do the work was (~~MAILED~~) submitted on Form C-102 on **August 22nd,** 19**39**  
and approval of the proposed plan was (~~MAILED~~) obtained. (Cross out incorrect words)

## DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Plugged back 4043' to 4021' to shut off bottom hole water.

For further details see attached.



Witnessed by \_\_\_\_\_  
Name Company Title

Subscribed and sworn to before me this \_\_\_\_\_

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

**29th** day of **September**, 19 **39**Name **[Signature]**Position **District Superintendent**Representing **The Texas Company**

Company or Operator

My Commission expires **6-1-41**Address **Box 1270, Midland, Texas.**

Remarks:

**[Signature]**  
Name  
GAS INSPECTOR  
Title

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