

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

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-off, 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	X	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

Wink Texas
Place8-13-37
DateOIL 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 Atlantic Refining Co. State **P** Well No. **1** in the
 Company or Operator Lease
E/2 of NW/4 of Sec. **25**, T. **20 S**, R. **36 E**, N. M. P. M.,
Emico Field, **Lea** County.

The dates of this work were as follows: **8-7-37**

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

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Casing shut off test on 5 1/2" oil string.

Cement was allowed to set 48 hours. The casing
 was then tested according to State regulations.

DUPLICATE

Witnessed by _____ Name _____ Company _____ Title _____

Subscribed and sworn to before me this _____

15th day of **August**, 19 **37**

Notary Public

My Commission expires **June 1-1939**

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

Name **[Signature]**Position **Superintendent**Representing **The Atlantic Refining Co.**

Company or Operator

Address **876 Wink Texas**

Remarks:

[Signature]
 Name
Oil & Gas Inspector
 Title

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