

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			

MONUMENT, NEW MEXICO.
Place

10-8-1936
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 OHIO OIL COMPANY BERTHA BARBER Well No. 4 in the
Company or Operator Lease
NE 1/4 SW 1/4 of Sec. 5, T. 20 S., R. 37 E., N. M. P. M.,
Monument Field, Lea County.

The dates of this work were as follows: Oct. 5, 1936

Notice of intention to do the work was ~~made~~ submitted on Form C-102 on 10-3 1936
and approval of the proposed plan was ~~made~~ obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Ran 151 ft. of 12 1/2" casing and cemented w/150 sax oil well
cement - allowed to stand then drilled plug and tested
w/1200# pressure for 1 hour - test O.K.

Witnessed by Glenn Bish, THE OHIO OIL COMPANY, Supt.
Name Company Title

Subscribed and sworn to before me this _____

8th day of Oct., 1936

[Signature]
Notary Public

My Commission expires _____

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

Name [Signature]

Position Supt.

Representing THE OHIO OIL COMPANY.

Address P.O. Box 00, HOBBS, N.M.
Company or Operator

Remarks:

[Signature]
Name
Title

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