TITLE

NEW MEXICO STATE LAND OFFICE OFFICE OF THE STATE GEOLOGIST

SANTA FE, NEW MEXICO

MISCELLANEOUS REPORTS ON WELLS

Submit this report in duplicate to the State Geologist or proper Oil and Gas Inspector 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 water shut-off, result of abandonment of well, and other important operations, even though the work was witnessed by the State Geologist or Oil and Gas Inspector. Reports on minor operations need not be signed and sworn to before a notary public, but such operations should be witnessed by an Oil and Gas Inspector if possible.

but such operations should be witnes. Indic	•	and Gas Inspecto eport by checkin	-			
REPORT ON BEGINNING DRILLING OPERATIONS REPORT ON RESULT OF SHOOTING WELL		REPORT ON	DEEPENING V	VELL	T	
		REPORT ON PULLING OR OTHERWISE ALTERING CASING				
	EPORT ON RESULT OF TEST OF WATER SHUT-OFF			REPORT ON REPAIRING WELL		
REPORT ON RESULT OF ABANDON OF WELL	IMENT		ACID THEAS		I	
		<u>. </u>		April (
Mr. B. H. Velle	State Caplanist	PLACE		DATE	14	
Santa Fe, N. Mex.	State Geologist,					
Following is a report on the wor Stanoling 011 & Gas Company			State We			
company or operator of Sec.	9	.T 198	R.		IPM.	
Hobbs Oi	l Field,	Lea	, 1.	ounty.		
The dates of this work were as fo	ollows: 🔼 👫 🕻	treatment or	March 30,	I9 54		
Notice of intention to do the w						
out incorrect words.)	and approval o	t the proposed p	olan was (obtained.	(Cross	
DETAILED ACCOUN	NT OF WORK	C DONE AND	RESULTS OF	RTAINED		
ration allowable until the representation and the potential before acid to feet of gas. After acid tree 5,000,000 cubic feet of gas, on preration test was 5557 well a new potential of 4400	regiment West atment the p , an increase berrels, whi O berrels for	ISIO berrole execution is do se of 2015. Op. ch placed on	of oil wit 1400 barrels on flow tos	h 2,655,000 (of oil with it through tel	mbie ing	
DUPLICAT	Constitution of the Consti					
Subscribed and sworn to before me this		given above	swear or affin	rm that the information	ormation	
3/Sanis	,	Name Position Representin	,	Foreman	3empary	
My commission expires Getober I	.,	Address	_	COMPANY OR O	PERATOR.	
Remarks:		¥	A FACTOR	who		