

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.

Indicate nature of report by checking below:

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON DEEPENING WELL	
REPORT ON RESULT OF SHOOTING WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF WATER SHUT-OFF	XXX	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF ABANDONMENT OF WELL			

Hobbs, N.M. April 4th 1932

PLACE

DATE

Mr. **E. H. Wells** State Geologist,

Santa Fe, N. Mex.

Following is a report on the work done and the results obtained under the heading noted above at the
The Midwest Refining Company State Well No. **29** in the

COMPANY OR OPERATOR
SW 1/4 of Sec. **10**, T. **19** LEASE, R. **38**, N. M. P. M.,
Hobbs Oil Field, **Lea** County.

The dates of this work were as follows: **April 3rd 1932**

Notice of intention to do the work was (~~was not~~) submitted on Form SG **-103** on
March 29th, 19**32**, and approval of the proposed plan was (~~was not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Cement plug in 10-3-4" casing was drilled and hole bailed dry for water shut-off test - No fluid entered hole during the test - Drilling resumed

Subscribed and sworn to before me this

4th day of **April**, 19**32**

[Signature]
NOTARY PUBLIC.

My commission expires **October 17th 1934**

Remarks:

Attest

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

Name *[Signature]*

Position **District Superintendent**

Representing **The Midwest Refining Company**

Address **Hobbs, New Mexico** COMPANY OR OPERATOR.

[Signature]
STATE OIL & GAS INSPECTOR

NAME

P. O. BOX 456
HOBBS, NEW MEXICO

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