

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 RESULT OF SHOOTING OR CHEMICAL
TREATMENT OF WELL

REPORT ON RESULT OF TEST OF CASING
SHUT-OFF

REPORT ON RESULT OF PLUGGING OF WELL

REPORT ON REPAIRING WELL

REPORT ON PULLING OR OTHERWISE
ALTERING CASING

REPORT ON DEEPENING WELL

Hobbs, New Mexico.

May 12th, 1936.

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 _____
GULF OIL CORPORATION OF PENNSYLVANIA _____
GYPSY DIVISION _____ A.B. Reeves _____ Well No. 1 _____ in the _____
Company or Operator _____ Lease _____

SW/4 _____ of Sec. 29, T. 20E, R. 37E, N. M. P. M.,
Eunice _____ Field, Lea _____ County.

The dates of this work were as follows: Acidized 5-11-36 Tested 5- -1936.

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

The well was treated on May 11th, 1936 with 1000 gallons Dowell X Solution, followed up with 20 Barrels Oil.

Casing pressure 1575# & Tubing 1250#.

Before treatment well swabbed 4 Barrels per hour.

After treatment well swabbed 7 Bbls per hour.

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.

_____ day of _____, 19____

Name A. B. Reeves

Position District Superintendent

Representing _____
Company or Operator

Notary Public

My Commission expires _____

Address Hobbs, New Mexico.

Remarks:

APPROVED
L. H. Wiley
Name _____
Inspector _____ Title _____