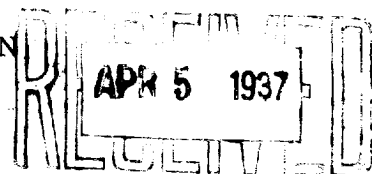


NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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, April 2, 1937

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 _____

THE TEXAS COMPANY State Aggies Well No. 5 in the
Company or Operator Lease
SE-1/4 of Sec. 31, T. 20 S, R. 37 E, N. M. P. M.,
Eunice Field, Lea County.

The dates of this work were as follows: See below

Notice of intention to do the work was [~~xxxx~~] submitted on Form C-102 on March 30, 19 37
and approval of the proposed plan was [~~was not~~] obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Set and cemented 3717' of 7" OD 24# 10thd seamless casing (124 Jts) at 3737' with 275 sacks Trinity common cement. Completed cementing at 2:00AM 3-30-37.

Drilled plug 1:00AM 4-2-37. Tested casing with 1400# pressure before and after drilling plug; pipe tested OK.

DUPLICATE

Witnessed by _____
Name Company Title

Subscribed and sworn before me this _____

2nd day of April, 19 37

M. C. Chapman
Notary Public

My commission expires 5-31-37

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

Name _____

Position District Superintendent

Representing THE TEXAS COMPANY

Company or Operator

Address Box K, Wink, Texas

Remarks:

APPROVED

State Superintendent
Name

Title

APR 7 1937