

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELL

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-offs, 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	REPORT ON DEEPENING WELL
REPORT ON RESULT OF PLUGGING OF WELL	REPORT ON TURNING 9 5/8" CASING

Hobbs, New Mexico

Nov. 4, 1949

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

Barnsdall Oil Company D. Hardy Well No. 3 in the
Company or Operator Lease

NE 1/4 of Sec. 29, T. 21S, R. 37E, N. M. P. M.,
Eunice Field, Lea County

The dates of this work were as follows: November 2, 1949

Notice of intention to do the work was (was ~~not~~) submitted on Form C-102 on Oct. 31, 1949 19____
and approval of the proposed plan was (was ~~not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

At total depth of 2850' 9 5/8" casing was set at 2848' and cemented with 1000 sacks.
Cement was allowed to set 48 hours and tested with 1000# pressure for 30 minutes, no pressure drop.

Witnessed by [Signature] Parker Drilling Co. Tool Pusher
Name Company Title

Subscribed and sworn to before me this _____
_____ day of _____, 19____

Notary Public

My Commission expires _____

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

Name [Signature]

Position Dist. Supt.

Representing Barnsdall Oil Company
Company or Operator

Address Box J, Hobbs, New Mexico

Remarks:

[Signature]
Name
Title

11/10/1911