DUPLICATE

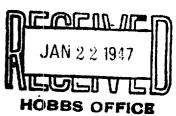
APPROVED

Date JAN 22 1947

OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS



Title

Sumbit 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 OPERA-TIONS REPORT ON REPAIRING WELL REPORT ON RESULT OF SHOOTING OR CHEM-REPORT ON PULLING OR OTHERWISE ICAL TREATMENT OF WELL ALTERING CASING REPORT ON RESULT OF TEST OF CASING SHUT-OFF REPORT ON DEEPENING WELL REPORT ON RESULT OF PLUGGING OF WELL REPORT ON SETTING CASING Monument, New Mexico January 21 1947 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____ Amerada Petroleum Corporation J. C. Hare ____Well No.___L Company or Operator Lease SME 21S _of Sec.__ brunson Field, County. The dates of this work were as follows: January 20, 1947 Notice of intention to do the work was (was not) submitted on Form C-102 on January 20 and approval of the proposed plan was (MEXXXX) obtained. (Cross out incorrect words.) DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED 240' TD Red Bed, Ran 13 3/8" OD 36#, Armco Slip Joint, Spiral Weld Casing and set at 230' and cemented with 200 Sacks Lone Star Cement Common with 200# Calcium Chloride added to Last 50 Sacks and plug pusped to 215' at 3PM January 20, 1947. Witnessed by K. V. Stephenson Foreman Title Amer. da Name I hereby swear or affirm that the information given above Subscribed and sworn before me this_ is true and correct. Name . Position _ Notary Public Representing Company or Operator My commission expires_ Remarks: