

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**MISCELLANEOUS REPORTS ON WELLS**

**RECEIVED**  
 FEB 6 1952

Submit this report in triplicate to the Oil Conservation Commission District Office within ten days after the work specified is completed. It should be signed and filed as a report on beginning drilling operations, results of shooting well, results 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. 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 | <b>X</b> | 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                       |          |  |  |

**February 7, 1952**

**Hobbs, New Mexico**

Date

Place

Following is a report on the work done and the results obtained under the heading noted above at the

**C. H. Sweet** Company or Operator **Stanford-Trickey** Well No. **3** in the  
**Unit N** of Sec. **7**, T. **20S**, R. **36E**, N. M. P. M.,  
**Skaggs** Pool **Lea** County.

The dates of this work were as follows: **1-30-52**

Notice of intention to do the work was (~~not~~) submitted on Form C-102 on **1-30-52**, 19\_\_\_\_, and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.)

**DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED**

**Acidized zone 3880 - 3946 with 3000 Gal. 15%. Well Swabbed & Flowed 4 Bbl. Per Hour.**

Witnessed by \_\_\_\_\_ Name \_\_\_\_\_ Company \_\_\_\_\_ Title \_\_\_\_\_

APPROVED:  
 OIL CONSERVATION COMMISSION

*Roy Garbary*  
 Name \_\_\_\_\_ Title \_\_\_\_\_

Date

19\_\_\_\_

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

Name \_\_\_\_\_

Position **Operator**

Representing **C. H. Sweet**

Company or Operator

Address **Box 1115, Hobbs, New Mexico**