

Orig: & 2cc: OGC  
2- cc: CSR

## 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	XX	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			

Sept. 26, 1949

Robbs, New Mexico

Date

Place

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 \_\_\_\_\_

Sinclair Oil & Gas Co. State 457 Well No. 1 in the \_\_\_\_\_

Company or Operator

Lease

of Sec. 22, T. 2, R. 36, N. M. P. M.,

Arrowhead

Field, \_\_\_\_\_ County.

The dates of this work were as follows: Sept. 11, 1949

Notice of intention to do the work was (was not) submitted on Form C-102 on Sept. 11, 1949 19

and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.)

## DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Acidised 7/1000 Gal. of 15% HCl. to 310' to 3135'

Previous production 13 Bbl. per 24 hrs.

Present production 13 Bbl. per 24 hrs.

Witnessed by Orville Baker \_\_\_\_\_ Engineer

Name

Company

Title

Subscribed and sworn before me this 26

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

day of Sept. 19 49

Name \_\_\_\_\_

Position \_\_\_\_\_

Representing \_\_\_\_\_

Company or Operator

Notary Public

My commission expires 2-6-50

Address \_\_\_\_\_

Remarks:

Name

Title