NEW MEXICO STATE LAND OFFICE 🦯

OFFICE OF THE STATE GEOLOGIST

SANTA FE, NEW MEXICO

## **MISCELLANEOUS REPORTS ON WELLS**

Submit this report in duplicate to the State Geologist or proper Oil and Gas Inspector 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 water shut-off, result of abandonment of well, and other important operations, even though the work was witnessed by the State Geologist or Oil and Gas Inspector. Reports on minor operations need not be signed and sworn to before a notary public, but such operations should be witnessed by an Oil and Gas inspector if possible.

Indicate nature of report by checking below:

REPORT ON BEGINNING DRIRLLING OPERATIONS	X	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF SHOOTING WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF WATER SHUT-OFF		REPORT ON REPAIRING WELL	P
REPORT ON RESULT OF ABANDONMENT OF WELL			

Hobbs, New Moxico October 17, 1935

Mr E. H. Wells State Geologist,

Santa Fe, N. Mex.

Following is a report the Supire gas and	on the work done and t	he results obtained <b>State D</b>	d under the heading Well No	g noted above at
Swipping or Operator	of Sec	<u>, T 21</u>	_, R <b>36</b>	
Zunci e	Oil Field,	Lea		County.
The dates of this w	ork were as follows:	10-17-35		

Notice of intention to do the work was (version) sumbitted on Form SG 101 \_\_\_\_\_\_\_\_\_ on 10-10-35 \_\_\_\_\_\_\_\_, and approval of the proposed plan was (version) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

#### Started drilling with rotary tools on 10-17-35

DUPLICATE

Subscribed	and	sworn	to	before	me	this
	-					

17 thay of. October .19 30 an Notary Public

6-26-39 My Commission expires.

Remarks:

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

ulms Name District Clerk Desition

Representing_	Empire	Gas.	and	Fuel	00.	
Company or Operator						
Address_Hot	bs. Net	w Me:	xi co			

Name

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#### OUPPEL OF THE STATE OF MALES

REAL AND STREET

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