

Orig: &amp; cc: OCC

cc: WMC

STE

(Form C-103)  
(Revised 7/1/52)

## NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

## MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after work is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, result of well repair, 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 RESULT OF TEST OF CASING SHUT-OFF	<input checked="" type="checkbox"/>	REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other)	

October 27, 1952

(Date)

Hobbs, New Mexico

(Place)

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

Sinclair Oil &amp; Gas Company

(Company or Operator)

Roy Barton

(Lease)

Milhoan Drilling Company

(Contractor)

Well No. 2 in the NW 1/4 NE 1/4 of Sec. 23

T. 21 S. 37 E., NMPM., Undesignated Pool, Lea County.

The Dates of this work were as follows: Oct. 24, 1952

Notice of intention to do the work (was) (was not) submitted on Form C-102 on \_\_\_\_\_, 19\_\_\_\_, (Cross out incorrect words)

and approval of the proposed plan (was) (was not) obtained.

## DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Spudded 10-23-52

Set 13 3/8" 32# casing @ 305' from surface and cemented with 300 sacks of common cement.

Let set for 24 hours and tested with 1000# pump pressure. No decrease in pressure and resumed drilling.

Witnessed by: R. L. Davis  
(Name)Milhoan Drilg. Co.  
(Company)Driller  
(Title)

Approved:

OIL CONSERVATION COMMISSION

*Roy Barton*  
(Signature)  
Oil & Gas Inspector  
(Title)

OCT 29 1952

(Title)

(Date)

I hereby certify that the information given above is true and complete to the best of my knowledge.

Name \_\_\_\_\_

Position: Dist. Supt. \_\_\_\_\_

Representing: Sinclair Oil &amp; Gas Co. \_\_\_\_\_

Address: Box 1927 Hobbs, N.M. \_\_\_\_\_