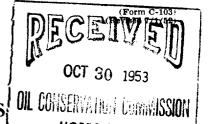


NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico



MISCELLANEOUS REPORTS ON WELL

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified 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, rc in

| result of well repair, and other importar instructions in the Rules and Regulations | nt operations, even though the s of the Commission. | work was witnessed b | by an agent of the Commis | ssion. See additional |
|--|---|---|-------------------------------|-----------------------|
| | Indicate Nature of Repo | ort by Checking Below | w | |
| REPORT ON BEGINNING DRILLING OPERATIONS | REPORT ON RESULT OF CASING SHUT- | | REPORT ON REPAIRING WELL | |
| REPORT ON RESULT OF PLUGGING WELL | REPORT ON RECO | MPLETION | REPORT ON (Other) | |
| | Octobs (Date) | or 28 , 1 953 | Hobbs, New Mer | XIGO (Place) |
| Following is a report on the work | done and the results obtained | under the heading not | ted above at the | |
| Continental Oil Company (Company or Operator) | | Pell Lake Unit | | |
| Helmerich and Payne, I | ne . | Well No | in the | |
| T23, R34; NMPM., | | Pool, | a& | County. |
| The Dates of this work were as follows: | | Oct. 22, 23, 2 | 4, 1953 | |
| Notice of intention to do the work (was) | (was not) submitted on Form | C-102 on | Cross out incorrect words) | , 19, |
| and approval of the proposed plan (was) | | ((| bross out meoriect words) | |
| DETAI | LED ACCOUNT OF WORK | DONE AND RESUL | TS OBTAINED | |
| Set 13 3/8" casing down at 4:30 A. M., 10-2 | at 685°, using 6 con 2-53. Coment circul | araliz ers en d | 650 sacks neat cer | ent. Plug |
| On October 24, 1953 plug. No pressure drop. | , drilled out plug. | Tested casing | before and after | drilling |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Witnessed by(Name) | | (Company) | (Title) | |
| Approved: OIL CONSERVATION (| COMMISSION | I hereby certify that to the best of my kn | t the information given above | is true and complete |
| Manual . | | Name Name | Chutua | eich |
| (Name) | | PositionAsst | District-Superin | tendent |

Representing Jont in ontal Oil Octpany Address Box 427, Hobbs, New Hexico