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

pleted. It should be signed and filed as a result of well repair, and other import- instructions in the Rules and Regulatio	ant operations, even though the work	ns, Results of test of casing sn was witnessed by an agent of	the Commission. See additional
	Indicate Nature of Report by	Checking Below	
REPORT ON BEGINNING DRILLING OPERATIONS	REPORT ON RESULT OF OF CASING SHUT-OFF	TEST REPORT REPAIRIN	
REPORT ON RESULT OF PLUGGING WELL	REPORT ON RECOMPLE OPERATION	(Other)	ON X
	2-4-84		Hobbs. New Mexico
	(Date)	•••••••••••••••••••••••••••••••••••••••	(Place)
Following is a report on the work	done and the results obtained under	tne heading noted above at th	<b>e</b> .
Sharehin and A. Darbinson and		Nov. No.	xioo State S s/s A
Kamble Oil & Rectaing Company or O	perator)"	(Lease	<del>:</del> )
H & K Drilling Co. (Contracto	Drinkard-Oll	Noin the	<sup>1</sup> / <sub>4</sub> of Sec,
T. 228 , R. 378 , NMPM.,	Tab Oce	7	
The Dates of this work were as folows:			
Notice of intention to do the work (was	s) (was not) submitted on Form C-102	on (Cross out incorrec	, 19,
and approval of the proposed plan (wa	s) ( obtained.		
	ILED ACCOUNT OF WORK DONE	AND RESILTS ORTAINE	n
	6160, 6050-6065, 6020-606		
Perforating Gums Atlas C	are, 200 shots.	the contract Name of the way	
2.27 El Machael newformati	and with 400 callons were	tern and ecid.	
2-24-54 Loaded hale with	edl and treated 5960-60	00, 6020-6060, 6050-	6005 and 6110-6160 with
3000 gallens Mosters 136	L. T. acid. Max. and m	in excing presentes	2330 md 2300f. Mof/dow. Tabine wrose
2-28-54 Touted Tubb Gas 350f.	- 10.		
3-4-54 Tosted Drinkurd O	the state of the s	30/64° chalte and pro	duced 54-47 toles. Plu,
gas volume 450.7 Not/day	GCR 8274.	•	
•			
<i>a</i> .			
24 Bald	ALC Burble Oll	A Baffining Commonw	Asst. Dist. Superinte
Witnessed by (Name)	(Comp	any)	(Title)
Approved: OXL CONSERVATION		ereby certify that the information he best of my knowledge.	n given above is true and complete
A Stante	√ Nar	ne My m	1 trzm
(Name)		Position	
En divise Control		oresenting. Bushle 081 1	her heing To.
(Title)	(Date) A	ddress	be, I. I.

(i) 1.