

Place _____
Date _____

Glenn Staley
Proration Office
Hobbs, New Mexico.

Designate UNIT well is located in _____

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

NOTICE OF COMPLETION OF: (Lease) _____ Well No. _____
_____ feet from _____ line: _____ feet from _____ line;
Section _____ Township _____ Range _____

DATE STARTED _____
DATE COMPLETED _____
ELEVATION _____
TOTAL DEPTH S.L. _____
CABLE TOOLS _____ ROTARY TOOLS _____

CASING RECORD

SIZE	DEPTH	SAX CEMENT
SIZE	DEPTH	SAX CEMENT
SIZE	DEPTH	SAX CEMENT

TUBING RECORD

SIZE _____ DEPTH _____

ACID RECORD

NO. GALS _____
NO. GALS _____
NO. GALS _____

SHOT RECORD

NO. QTS. _____
NO. QTS. _____
NO. QTS. _____

FORMATION TOPS

Anhydrite _____
Top Salt _____
Base Salt _____
Red Sand _____
Brown Lime _____
White Lime _____
Oil or Gas Pay _____
Water _____

ILLEGIBLE

Initial Production Test _____ Pumping _____ Flowing _____
Test After Acid or Shot _____

Initial GAS VOLUME _____

SCHEDULE NO. _____ DATE _____

PIPE LINE TAKING OIL _____

REMARKS _____ COMPANY _____

SIGNED BY: *W. B. Phelps*

