

MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in triplicate to the Oil Conservation Commission or its proper agent 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 casing shut-off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. 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 REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF	<input checked="" type="checkbox"/>	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

Hobbs, New Mexico. June 8th, 1936.

Place

Date

OIL CONSERVATION COMMISSION,
Santa Fe, New Mexico.

Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the
REPOLLO OIL COMPANY **J.T. LANEHART "A"** Well No. **1** in the
 Company or Operator Lease
N/2 NW/4 of Sec. **28**, T. **25S**, R. **37E**, N. M. P. M.,
JAL Field, **LEA** County.

The dates of this work were as follows: **June 8th, 1936.**
 Notice of intention to do the work was (was ~~not~~) submitted on Form C-102 on **June 5th,** 19 **36**
 and approval of the proposed plan was (was ~~not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Tested 7"OD casing for water shut-off with 1200# pump pressure.
 Closed all valves and allowed to stand for 30 minutes. Tested OK.

DUPLICATE

Witnessed by **W.T. Ganes** **Manville & Thompson**
 Name Company Title

Subscribed and sworn to before me this **15**

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

day of **June**, 19 **36**

Name **L. Smith**

Position **Dist. Superintendent**

Representing **Repollo Oil Company**
 Company or Operator

My Commission expires **1937**

Address **Box # 156, Hobbs, N.M.**

Remarks:

APPROVED

J. H. Smith Name
 Oil & Gas Inspector Title

168

THE NEW AGENTS IN THE TREATMENT OF

THE DISEASES OF THE CENTRAL NERVOUS SYSTEM. A review of the literature and a comparison of the new agents with the old ones.

By J. W. YOUNG, M.D., F.R.C.P.

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