

NEW 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 RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL REPORT ON RESULT OF TEST OF CASING SHUT-OFF XXX REPORT ON RESULT OF PLUGGING OF WELL	REPORT ON REPAIRING WELL REPORT ON PULLING OR OTHERWISE ALTERING CASING REPORT ON DEEPENING WELL
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Wink, Texas, April 13, 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
The Texas Company T. P. Lanehart Well No. 1 in the
NE 1/4 Company or Operator 29 Lease
Jal of Sec. 29, T. 25 E, R. 37 E, N. M. P. M.,
Jal Field, Lea County.

The dates of this work were as follows: See below

Notice of intention to do the work was (~~XXXXX~~) submitted on Form C-102 on 4-11-36 19
 and approval of the proposed plan was (~~XXXXX~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

T.D. 2636' Lime.

Set and cemented 2444' of 7" OD 24# 10thd seamless casing at 2460' with 125 sacks Trinity common cement. Completed cementing 1:15PM 4-10-36, Halliburton method.

Drilled plug 11PM 4-14-36. Tested casing with 1200# pressure before and after drilling plug; tested OK.

DUPLICATE

Witnessed by _____ Name _____ Company _____ Title _____

Subscribed and sworn to before me this 15th

day of April, 19 36

W. E. Chapman
Notary Public

My Commission expires 5-31-37

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

Name *W. E. Chapman*
Position District Superintendent

Representing The Texas Company
Company or Operator

Address Box K, Wink, Texas

Remarks:

W. E. Chapman
Name
District Superintendent
Title

