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MGRRE_PureOilScoutTickets_Martens, E._1_21117108250000

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MGRRE_PureOilScoutTickets_Martens, E._1_21117108250000

API 21117108250000

Permit Number 10825

Lease Name Martens, E.

Well Number 1

County Montcalm

Township 10N

Range 08W

Section 11

2021 DEQ or Pure co_name McClure Drilling Company The

Pure Number 665

Latitude 43.2782

Longitude -85.23107

THE PURE OIL COMPANY

Date March 15, 1946 Corrected LOCATION REPORT A.F.E. No. _____

Division Mich. Producing District _____ Lease E. Martens

Acres _____ Lease No. _____ Elevation _____ Well No. 1 (Serial No. 665)

Quadrangle NW NW NW Sec. 11 Twp. 10 N Rge. 8 W Twp. Montcalm

Survey _____ County Montcalm State Michigan

Operator The McClure Drilling Company Map Montcalm Township, Montcalm County

Feet from North Line of Lease
 " " East " " "
 " " South " " "
 " " West " " "
 Feet from North Line of Section
 " " East " " "
 " " South " " "
 " " West " " "

LEGEND

○ Location

☼ Gas Well

● Oil Well

☼ Gas - Distillate Well

☼ or ○ Dry Hole

● Dry Showing Oil

☼ Dry Showing Gas

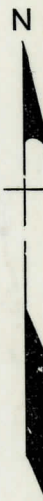
⊖ Abandoned Location

☼ or ☼ Abandoned Gas Well

● or ● Abandoned Oil Well

⊖ or ⊖ Input Well

See plat - Montcalm #665.



Remarks: Change of operator. Scale _____

Submitted by Scouting Dept. Approved by _____ Division Manager

Approved by _____ Vice-President - General Manager

THE PURE OIL COMPANY

Date June 7, 1944

LOCATION REPORT

A.F.E. No. _____

Division Mich. Producing

District _____

Lease _____

E. Martens

Acres _____ Lease No. _____

Elevation _____

Well No. 1(Serial No. 665)Quadrangle NW-NW-NWSec. 11Twp. 10NRge. 8WMontcalmMontcalm

Survey _____

County MontcalmState MichiganOperator Allegan Pipe & Supply Co.Map Montcalm Township, Montcalm County330 330 Feet from North Line of Lease

" " East " " "

" " South " " "

330 330 " " West " " "Feet from North Line of Section 1/4

" " East " " "

" " South " " "

330 330 " " West " " "

LEGEND

○ Location



Gas Well



Oil Well



Gas-Distillate Well



Dry Hole



Dry Showing Oil



Dry Showing Gas



Abandoned Location



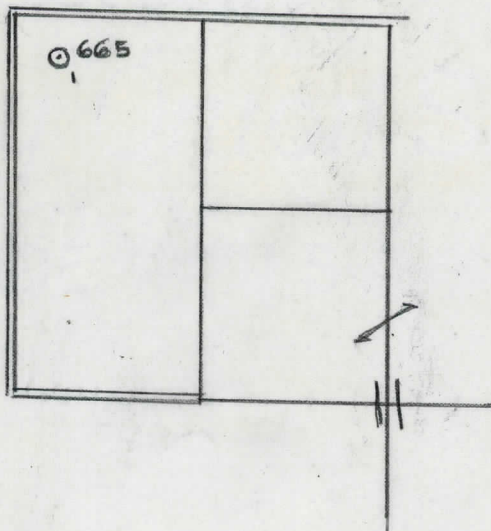
Abandoned Gas Well



Abandoned Oil Well



Input Well



Remarks: _____

Scale _____

Submitted by RN

Civil Engineer

Approved by _____

Division Manager

Approved by _____

Vice-President-General Manager

Signed **D. C. Shackelford**