

## NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company <b>El Paso Natural Gas Company</b>			Address <b>P. O. Box 990, Farmington, New Mexico</b>			
Lease <b>Huerfano Unit</b>	Well No. <b>139</b>	Unit Letter <b>J</b>	Section <b>32</b>	Township <b>26N</b>	Range <b>9W</b>	
Date Work Performed <b>11-14-63</b>	Pool <b>Basin Dakota</b>			County <b>San Juan</b>		

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations    ☒ Casing Test and Cement Job    ☐ Other (Explain):  
☐ Plugging    ☐ Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Spudded well 11-13-<sup>63</sup>~~53~~, drilled to 330'. Ran 10 joints 9 5/8", 32.30#, J-55 casing (315') set at 326' w/200 sks. regular cement, 1/4 cu. ft. Strata-Crete "6"/sk., 2% calcium chloride. PD @ 1:00 A. M. 11-14-63. Cement circulated.

Witnessed by <b>Roy Webb</b>	Position <b>Assistant Drlg. Supt.</b>	Company <b>El Paso Natural Gas Company</b>
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## FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

## ORIGINAL WELL DATA

D F Elev.	T D	P BTD	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

## RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

## OIL CONSERVATION COMMISSION

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved by <b>Original Signed By A. R. KENDRICK</b>	Name <b>ORIGINAL SIGNED E. S. OBERLY</b>
Title <b>PETROLEUM ENGINEER DIST. NO. 3</b>	Position <b>Petroleum Engineer</b>
Date <b>NOV 22 1963</b>	Company <b>El Paso Natural Gas Company</b>

	DATE	TIME
NO.	CLASSIFICATION	STATUS
NAME	DEPT.	UNIT
STREET ADDRESS	CITY	STATE
DISTRICT		
TELEPHONE		
MAILING ADDRESS		
CITY		
STATE		
ZIP CODE		
TO BE MAILED	ON	
THRU	GAS	
REMARKS		
SUBMITTER		