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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**MISCELLANEOUS REPORTS ON WELLS**

**FORM C-103**  
(Rev 3-55)

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

Name of Company				Address			
Lease		Well No.	Unit Letter	Section	Township	Range	
Date Work Performed	Pool			County			

**THIS IS A REPORT OF:** *(Check appropriate block)*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Beginning Drilling Operations | <input type="checkbox"/> Casing Test and Cement Job | <input type="checkbox"/> Other <i>(Explain):</i> |
| <input type="checkbox"/> Plugging                      | <input type="checkbox"/> Remedial Work              |  |

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

Witnessed by	Position	Company
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**FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY**

**ORIGINAL WELL DATA**

D F Elev.	T D	P B T D	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	Name
Title	Position
Date	Company