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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: **Socony Mobil Oil Company, Inc.** Address: **Box 2406, Hobbs, New Mexico**

Lease State: **NCN** Well No.: **1** Unit Letter: **85** Section: **24** Township: **17 S** Range: **34 E**

Date Work Performed: **8/1/61** Pool: **Vacuum** County: **Lea**

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain): **Temporarily Abandoned**
 Plugging
 Remedial Work

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

ID: 4418'

Studying for workover.

Witnessed by: _____ Position: _____ Company: _____

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: **W. H. Lutz**
Title: _____ Position: **Senior Clerk**
Date: _____ Company: **Socony Mobil Oil Company, Inc.**