

**DUPLICATE**

Form C-103  
(Revised 3-55)

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY O. D. ALSABROOK 519 1st National Bank Bldg., Dallas, Texas  
(Address)

LEASE Holder & Ross State WELL NO. 1-A UNIT I S 11 T 178 R 36E  
DATE WORK PERFORMED 11-15-56 POOL Undesignated

This is a Report of: (Check appropriate block)  Results of Test of Casing Shut-off  
 Beginning Drilling Operations  Remedial Work  
 Plugging  Other \_\_\_\_\_

Detailed account of work done, nature and quantity of materials used and results obtained.  
**Ran 10 joints of 8 5/8" O.D. 24# casing, 325 feet set at 338 feet cemented with 200 sacks. Regular neat cement. Cement circulated. Let set for 24 hours. Test casing with 750 #'s for 30 minutes. Tested. O.K.**

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. \_\_\_\_\_ TD \_\_\_\_\_ PBD \_\_\_\_\_ Prod. Int. \_\_\_\_\_ Compl Date \_\_\_\_\_  
Tbng. Dia \_\_\_\_\_ Tbng Depth \_\_\_\_\_ Oil String Dia \_\_\_\_\_ Oil String Depth \_\_\_\_\_  
Perf Interval (s) \_\_\_\_\_  
Open Hole Interval \_\_\_\_\_ Producing Formation (s) \_\_\_\_\_

RESULTS OF WORKOVER:

	BEFORE	AFTER
Date of Test	_____	_____
Oil Production, bbls. per day	_____	_____
Gas Production, Mcf per day	_____	_____
Water Production, bbls. per day	_____	_____
Gas-Oil Ratio, cu. ft. per bbl.	_____	_____
Gas Well Potential, Mcf per day	_____	_____
Witnessed by _____		
	(Company)	

OIL CONSERVATION COMMISSION

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

Name R. F. Montgomery  
Title PROBATION MANAGER  
Date DEC 6 - 1956

Name [Signature]  
Position Production Superintendent  
Company O. D. Alsbrook