

Form C-103  
 (Revised 03-55)  
 DISTRICT OFFICE OCC  
 17 DEC 20 PM 3:23

NEW MEXICO OIL CONSERVATION COMMISSION  
 MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Tres Oil Company (Address)

LEASE Williers " " WELL NO. 1 UNIT P S 33 T 100 R 37E

DATE WORK PERFORMED 12-3-57 POOL Monument

This is a Report of: (Check appropriate block)

<input checked="" type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Results of Test of Casing Shut-off
<input type="checkbox"/> Plugging	<input type="checkbox"/> Remedial Work
	<input type="checkbox"/> Other _____

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

Spudded well 2:00p.m., December 3, 1957.

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. \_\_\_\_\_ TD \_\_\_\_\_ PBD \_\_\_\_\_ Prod. Int. \_\_\_\_\_ Compl Date \_\_\_\_\_  
 Tbnng. Dia \_\_\_\_\_ Tbnng 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

Name [Signature]  
 Title \_\_\_\_\_  
 Date \_\_\_\_\_

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

Name [Signature]  
 Position Agent  
 Company Tres Oil Company