

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 Continental Oil Company | | | | Address Box 68, Eunice, New Mexico | | | |
| Lease Stevens B-14 | | Well No. 2 | Unit Letter J | Section 14 | Township 23-S | Range 36-E | |
| Date Work Performed 4-5-60 | | Pool Langlie Mattix | | | County Lea | | |

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 5:15 pm 4-5-60. Set 8 5/8" casing at 362' W/200 sx. Plug down 11:45 pm 4-5-60. Cement circulated. WOC 18 hours. Thirty minute casing test before and after plug was drilled 600#.

Approved by USGS: April 12, 1960

LC 030556 b

| | | |
|--------------------------------------|-------------------------------------|---|
| Witnessed by R. A. Carlile | Position Drilling Foreman | Company Continental Oil 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 J. R. Parker | |
| Title | | Position District Superintendent | |
| Date | | Company Continental Oil Company | |