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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)

Jan 13 9 15 AM '64

Name of Company SOCONY MOBIL OIL COMPANY, INC.				Address Box 1800, Hobbs, New Mexico			
Lease	Well No.	Unit Letter	Section	Township	Range		
State "X"	4	B	7	17 S	34 E		
Date Work Performed 1/1/64	Pool Vacuum (G-S.A.)			County Lea			

THIS IS A REPORT OF: (Check appropriate block)

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

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

TD: 4703

Studying for workover

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

ORIGINAL WELL DATA

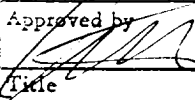
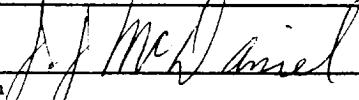
D F Elev.	TD	P BTD	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

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 Group Supervisor
Date	Company Socony Mobil Oil Company, Inc.