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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 11D6)

| | | | | | | | |
|--|-----------------------|-------------------------|---------------------|--|---------------------|--|--|
| Name of Company Phillips Petroleum Company | | | | Address Box 2130 - Hobbs, New Mexico | | | |
| Lease Santa Fe | Well No. 98 | Unit Letter C | Section 5 | Township 18S | Range 35E | | |

| | | |
|--|--------------------------------|----------------------|
| Date Work Performed 7/3-4/1964 | Pool Vacuum Glorieta | 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.

Halliburton cemented 4-1/2" casing (9.5 and 10.5#) at 6255' with 1360 cu. ft. Litewate 20% DD followed with 300 sacks regular cement. Displaced plug to 6015'. WOC 22 hours. Temperature survey top of cement at 3000'. Tested casing with 1500# for 30 minutes, no pressure loss.

| | | |
|---|----------------------------------|--|
| Witnessed by C. L. Sumnerwell | Position Lease Foreman | Company Phillips Petroleum Co. |
|---|----------------------------------|--|

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

| | | | | |
|------------------------|--------------|---------------------|------------------------|-----------------|
| D F Elev. | T D | 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 <i>[Signature]</i> | Name <i>[Signature]</i> |
| Title <i>[Signature]</i> | Position Office Manager |
| Date | Company Phillips Petroleum Co. |