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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)

| | | | | | | | |
|---|--------------------------------|-------------------------|---------------------|--|---------------------|--|--|
| Name of Company Gulf Oil Corporation | | | | Address Box 670, Hobbs, N.M. | | | |
| Lease G. C. Matthews | Well No. 8 | Unit Letter 0 | Section 6 | Township 20S | Range 37E | | |
| Date Work Performed 10-14 to 10-19-64 | Pool Mormont Blinney | | | County Lex | | | |

THIS IS A REPORT OF: (Check appropriate block)

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

Acidized

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

5715' PB. Dumped 500 gallons of 15% HCl acid down casing. Flushed with 40 barrels of lease oil. Returned well to production.

| | | |
|--------------------------------------|--|--|
| Witnessed by P. M. Caraway | Position Maintenance Foreman | Company Gulf Oil Corporation |
|--------------------------------------|--|--|

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 | 10-7-64 | 28 | | 0 | | |
| After Workover | 10-18-64 | 30 | | Trace | | |

OIL CONSERVATION COMMISSION

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

| | |
|---|--|
| Approved by | Name Area Production Manager |
| Title Area Production Manager | Position Area Production Manager |
| Date | Company Gulf Oil Corporation |