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NEW MEXICO OIL CONSERVATION COMMISSION
HUBBS OFFICE O.C.C.

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS
NOV 19 10 19 AM '63

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

Name of Company				Address			
Lease		Well No.	Unit Letter	Section	Township	Range	
Date Work Performed		Pool			County		

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.

Witnessed by	Position	Company
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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
Title	Position
Date	Company