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NEW MEXICO OIL CONSERVATION COMMISSION FORM C-103 (Rev 3-55)											
MISCELLANEOUS REPORTS ON WELLS											
		(5	ubmit to appropi	riate District O	ffice as	per Com	mission Rul	e 1106)			
					Addres		<u>1999</u>	Crist Com	111 1	1 05	
Name of Company Sun Oil							. Odessa.	Torne			
Lease	Composity.	<u></u>		Well No. Un	it Letter		Township	15443	Range	t	
	f New Me			1	0	7	County		<u></u> 3	E	
Date Work Perfor			Pool	anted			Lea				
THIS IS A REPORT OF: (Check appropriate block)											
Beginning Drilling Operations Casing Test and Cement Job Scher (Explain):										- -	
				medial Work					and Completions.		
Detailed account of work done, nature and quantity of materials used, and results obtained.											
On 12-20-62 - Treated all perfs. w/1500 Gal. MEC Acid down 2" tbg. BD Pres. W/acid											
5000#/3000#. On 12-21-62 - In 11 hrs. swab 9 bbls. oil, 21 bbls. wtr.											
On 12-27-62 - Full the st Baker CI BP 39700'. Dump 1 sx. cement on top. Perf $4\frac{1}{2}$											
csg. 9310 - 9322' w/2 JSPF. Ran 2" tbg. seated 9331', W/Guib. Packer											
9 262' .											
On 12-29-62 - Acidized Perf. w/500 Gal. 15% HCL HEC Acid. BD Pres. W/Acid 2500#. On 1-1-63 - Treated Perf. w/500 Gal. MEC Acid. BD Pres. W/Acid 2400#. Swab Well in.											
Well Flowing Oil and Load Water.											
withessed by				Position	Position			Company			
N. J. Keith Foreman FILL IN BELOW FOR REME						Sun Oil Company					
			TILL IN BE	ORIGINA				· ••• 4			
DFElev. TD			PBTD				Producing Interval		mpletion Date		
			Tubin - Darat		0:1 \$	ne Diam	eter	Oil Stri			
Tubing Diameter		Tubing Depth		on su	Oil String Diameter						
Perforated Interv	val(s)		<u></u>	• • • •							
				<u> </u>	Produc	ing For-	ation(s)	<u></u>			
Open Hole Interval Producing Formation(s)											
				RESULTS	OF WOR	KOVER					
Test	Date of Test		Oil Productio	n Gas Prod MCF			Production B P D	GOR Cubic feet/Bbl		Gas Well Potential MCFPD	
Before	Test		BPD	MCF		+					
Workover			ļ								
After Workover											
OIL CONSERVATION COMMISSION						I hereby certify that the information given above is true and complet to the best of my knowledge.					
Approved by						Name OD anigh					
Title						Position					
Date						Area Superintendent					
L			<u></u>			jun Oi	1 Company				

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