| NO. OF COPIES RECEIVED | · · | | Form C. 100 | |
|---|--|-------------------------------|--|------------|
| DISTRIBUTION | 31 1 111111 | Form C-103 Supersedes Old | | |
| SANTA FE | NEW MEXICO OIL CONSERVA | C-102 and C-103 | | |
| FILE | NEW MEXICO OIL CONSERVA | II 58 BM IEE | Effective 1-1-65 | |
| U.S.G.S. | 1 | ii Sa till 68 | 5a. Indicate Type of Lease | |
| LAND OFFICE | 1 | | State X Fe | |
| OPERATOR | 1 | | 5. State Oil & Gas Lease No. | |
| | , | | E-1311 | ļ |
| SUNDS | | | | |
| I. OIL X GAS WELL . | OTHER- | , | 7. Unit Agreement Name | **** |
| 2, Name of Operator | 8. Farm or Lease Name | | | |
| Socony Mobil Oil Compa | New Mex. "X" | | | |
| 3. Address of Operator | 9. Well No. | | | |
| Box 1800, Hobbs, New N | lexico | | 1 | |
| 4, Location of Well UNIT LETTER P 400 FEET FROM THE East LINE AND FEET F | | | 10. Field and Pool, or Wildcat N.Mescalero San And | i . |
| | • | | | 77111 |
| THE South LINE, SECTI | ирм. | | | |
| 15. Elevation (Show whether DF, RT, GR, etc.) | | | 12. County | 11117 |
| | 4324 GL | | Lea | VIIII. |
| OTHER | ОТ | IG TEST AND CEMENT JOB X | | |
| WORK) SEE RULE 1103. | perations (Clearly state all pertinent details, an | d give pertinent dates, inclu | ding estimated date of starting any p | roposed |
| Commenced drilling ope | erations @ 6:00 P.M 1-9-66 | | •. | |
| | 2# LW Casing @ 1566, cemented lown 11:00 A.M. 1-11-66, Ceme | | | |
| Test data for less tha | nn 18 hours WOC time (NMOCC d | ata): | | |
| (1) Volume of slurry | | t. | • | |
| (2) Incor 4% gel + Ir | - | | | |
| (3) Temperature of slurry mix - 90° F. | | | | |
| (4) Minimum formation temperature - 95° F. (5) Strength of cement in 12 hours - 2025 psi | | | | |
| | it in 12 hours – 2025 psi it in place prior to test – 1 | 2 hours | | |
| (6) Actual time cemer | it in place prior to test - I | L HOULS. | | |
| | | | | |
| | | | | |
| | | | | |
| | | | · | |
| | | | | |
| | | | | |
| 18, I hereby certify that the information | above is true and complete to the best of my kn | nowledge and belief. | | |
| ~ A 12 | | | | |
| SIGNED CO | Mon TITLE Group | Supervisor | DATE Jan. 12, 190 | 6 6 |
| | | | | |

APPROVED BY _

CONDITIONS OF APPROVAL, IF ANY: