Form C-103

OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut-off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below:

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF	X	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

Artesia, New Mexico — Place

October 2, 1945 — Date

OIL CONSERVATION COMMISSION,
SANTA FE, NEW MEXICO.
Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the Southern Union Gas Company (Company or Operator) Thompson (Lease) Well No. 3 in the SW/4 of Sec. 20, T. 17, R. 27E, N. M. P. M., Red Lake Field, Eddy County.

The dates of this work were as follows: 6-26-45 to 6-27-45

Notice of intention to do the work was (was not) submitted on Form C-102 on _____ 19____

and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

17'6" of 7" pipe was set, cemented with 100 sax Halliburton, shut down 72 hrs, bailed dry, resumed drilling

Witnessed by _____ Name _____ Company _____ Title

Subscribed and sworn before me this _____ day of _____, 19____

Notary Public

My commission expires _____

I hereby swear or affirm that the information given above is true and correct.

Name _____

Position _____

Representing _____ Company or Operator

Address _____

Remarks: Approved: 10-25-45

Name

Title