

NUMBER OF COPIES RECEIVED		3
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRODUCTION OFFICE		
OPERATOR		

# 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  
**Socony Mobil Oil Company, Inc.**

Address  
**Box 2406, Hobbs, New Mexico**

Lease <b>C. L. O'Brien "C"</b>	Well No. <b>1</b>	Unit Letter <b>M</b>	Section <b>1</b>	Township <b>9 S</b>	Range <b>28 E</b>
-----------------------------------	----------------------	-------------------------	---------------------	------------------------	----------------------

Date Work Performed <b>4/26 thru 4/27/63</b>	Pool <b>Undesignated</b>	County <b>Chaves</b>
---	-----------------------------	-------------------------

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.

Set 3450' of 24# J-55, 1000' of 32# H-40 & 5/8" casing @ 3450'. Cemented w/1075 sx Trinity Lite Water Cement + 50 sx Incon Nast cement. Plug down @ 5:15 AM 4/26/63. Did not circ. WOC 12 hrs. Ran Worth Well Temp. survey, top of cement @ 60'. WOC 12 additional hours. Tested 8 5/8" casing w/1000# for 30 mins. Tested OK.

RECEIVED

APR 30 1963

ARTESIA, OFFICE

Witnessed by <b>O. O. Roberts</b>	Position <b>Drilling Foreman</b>	Company <b>Socony Mobil Oil Company, Inc.</b>
--------------------------------------	-------------------------------------	--

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

### ORIGINAL WELL DATA

D F Elev.	T D	P BTD	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

Approved by **M. L. Armstrong**  
Title **Oil Well Inspector**

Date **APR 30 1963**

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

Name **A. J. McDaniel**  
Position **Group Supervisor**

Company **Socony Mobil Oil Company, Inc.**