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NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS

FORM C-103
(Rev 3-55)

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

| | | | | | | |
|--|------------------------|---|---------------------|------------------------|----------------------|--|
| Name of Company O. A. Peters Et Al | | Address 504 South Flower St., Santa Ana, California | | | | |
| Lease State | Well No. 1-X | Unit Letter P | Section 2 | Township 1 N | Range 20 E | |
| Date Work Performed 7-16-63 | Pool Wildcat | County De Baca | | | | |

THIS IS A REPORT OF: (Check appropriate block)

- | | | |
|--|---|---|
| <input type="checkbox"/> Beginning Drilling Operations | <input type="checkbox"/> Casing Test and Cement Job | <input type="checkbox"/> Other (Explain): |
| <input type="checkbox"/> Plugging | <input type="checkbox"/> Remedial Work | New Well |

Detailed account of work done, nature and quantity of materials used, and results obtained.

As Per our conversation:

Run 2951' ^{7"} O.D. 20# Csg. Cemented with 50 sacks regular cement. WOC 48 HRS.

Drilled cement plug tested two hours. Complete water shut off.

| | | |
|--------------|----------|---------|
| Witnessed by | Position | Company |
|--------------|----------|---------|

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

| | | | |
|------------------------|--------------|------------------------|------------------|
| D F Elev. | T D | Producing Interval | Completion Date |
| Tubing Diameter | Tubing Depth | Casing Diameter | Oil String Depth |
| Perforated Interval(s) | | Producing Formation(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.

O. A. Peters, Operator

Approved by *M L Armstrong*
OIL AND GAS INSPECTOR

Name *Sam Boyd*, Agent
 Position **Tom Boyd Drlg. Co., Inc.**

Date **AUG 29 1963**

Company **510 W. Texas Ave., Artesia N. M.**