

DUPLICATE

Form C-103

HOBBS OFFICE (Revised 3-55)

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Sunray Mid-Continent Oil Company - Box 128 - Hobbs, New Mexico  
(Address)

LEASE N.M. State J WELL NO. 1 UNIT D S 1 T 12-S R 33-E  
DATE WORK PERFORMED 3-1-57 POOL Undesignated

This is a Report of: (Check appropriate block) ☐ Results of Test of Casing Shut-off  
☐ Beginning Drilling Operations ☐ Remedial Work  
☒ Plugging ☐ Other

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

**Well has been plugged. Permanent marker in place, all pits filled. Location levelled, fences back in place and all debris cleaned up.**

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. \_\_\_\_\_ TD \_\_\_\_\_ PBD \_\_\_\_\_ Prod. Int. \_\_\_\_\_ Compl Date \_\_\_\_\_  
Tbng. Dia \_\_\_\_\_ Tbng Depth \_\_\_\_\_ Oil String Dia \_\_\_\_\_ Oil String Depth \_\_\_\_\_  
Perf Interval (s) \_\_\_\_\_  
Open Hole Interval \_\_\_\_\_ Producing Formation (s) \_\_\_\_\_

RESULTS OF WORKOVER:

BEFORE AFTER

|                                 |       |       |
|---------------------------------|-------|-------|
| Date of Test                    | _____ | _____ |
| Oil Production, bbls. per day   | _____ | _____ |
| Gas Production, Mcf per day     | _____ | _____ |
| Water Production, bbls. per day | _____ | _____ |
| Gas-Oil Ratio, cu. ft. per bbl. | _____ | _____ |
| Gas Well Potential, Mcf per day | _____ | _____ |
| Witnessed by _____              |       |       |

(Company)

OIL CONSERVATION COMMISSION

Name W. A. Gresser  
Title Oil & Gas Inspector  
Date MAR 1 1957

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

Name [Signature]  
Position Hobbs Area Superintendent  
Company Sunray Mid-Continent Oil Co.