| | | NEW MEXI | CO OIL | CONSI | ERVAT | 10N C | COMMISSI | | | FORM C-103 | |
|--|---------------|-------------------|--------------|----------------------------|--|-------------------------------|-------------------------------|----------------------|--------------------------------|--------------------|--|
| | | MISCEL | | | FPOR. | אט אד | I WELLS | ··· | • | (Rev 3-55) | |
| | (5 | ubmit to approp | | | | | mission Ru | (n 1106) | 17. 1 1. 19. 19. 19. | | |
| Name of Company | | | | | Address | | 1053 M:R | 2.5 M | 3 | 10 | |
| The Atlantic Fefining Company Lease | | | 197 11 NT | | | | | 1610, Midland, Teras | | | |
| Lease Samentha E. Ar | derson | L | 1-X | Unit | | 30 Section | Township 98 | | Rang 3 | se 5 E | |
| Date Work Performed Pool 3-8-59 to 3-10-59 Wildcat | | | | | | | County Lea County, New Mexico | | | | |
| THIS IS A REPORT OF: (Check appropriate block) | | | | | | | | | | | |
| Beginning Drilling (| peration | s 🚺 Ca | ising Test a | and Cem | ent Job | [| Other (E | xplain): | | | |
| Plugging | Remedial Work | | | | | | | | | | |
| Detailed account of work | done, nat | ure and quantity | of materials | s used, | and resu | lts obta | ined. | | | | |
| | | | | | | | | | | | |
| Witnessed by Position | | | | | Company | | | | | | |
| J. C. Burkhalte | | Dist. Drig. Supv. | | | | The Atlantic Refining Company | | | | | |
| | | FILL IN BE | | | · · · · · · | ` | PORTS ON | LY | | | |
| DFElev. TD | | | | ORIGINAL WELL DATA PBTD | | | Producing Interval | | Co | ompletion Date | |
| Fubing Diameter Tubing De | | Tubing Depth | | | Oil String Diame | | ter | | Oil String Depth | | |
| | | | | | | | | | | | |
| Perforated Interval(s) | | | | | | | | | | | |
| Open Hole Interval | | | | | Producing Formation(s) | | | | | | |
| • • • • • • • • • • • • • • • • • • • | | | DECILI | 75.05 | WORK | OVED | | <u> </u> | | | |
| Date | of | Oil Production | ···· { | | WORKOVER | | roduction | GO | R | Gas Well Potential | |
| Before Test | Test | | MCFP | | D B | | PD | Cubic fee | et/Bbl | MCFPD | |
| Workover After | | | | | | | | | | + | |
| Workover | | | | | | | | | | | |
| OIL CONSERVATION COMMISSION | | | | | I hereby certify that the information given above is true and complete to the best of my knowledge. | | | | | | |
| Approved by | | | | 1 | Name M. L. Mills | | | | | | |
| Title | | 7 / 6. | | | Positio | | • • • • • | | | | |
| Date | r | | | | Compan | | nel Dril | ling Mar | LAGOT | | |
| · | | | | | | The A | tlantic] | lefinin s | Comp | LTY | |