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| NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR | | NEW MEXICO OIL CONSERVATION COMMISSION MISCELLANEOUS REPORTS ON WELLS (Submit to appropriate District Office as per Commission Rule 1106) | | | FORM C-103 (Rev 3-55) | |
| Name of Company T.F. HODGE | | | Address 203 WAYNICK & WELCH BLDG. MIDLAND, TEXAS | | | |
| Lease HUMBLE STATE A | | Well No. 1 | Unit F | Letter 26 | Township 10-S | Range 33-E |
| Date Work Performed 4-30-61 | | Pool SOUTHLANE PENN | | | County LEA | |
| THIS IS A REPORT OF: (Check appropriate block) | | | | | | |
| <input type="checkbox"/> Beginning Drilling Operations | | <input checked="" type="checkbox"/> Casing Test and Cement Job | | <input type="checkbox"/> Other (Explain) | | |
| <input type="checkbox"/> Plugging | | <input type="checkbox"/> Remedial Work | | | | |
| Detailed account of work done, nature and quantity of materials used, and results obtained. | | | | | | |
| <p> DRILLED 11" HOLE TO 3988' RAN 8-5/8" CASING - 32 & 24# NEW SMLS GUIDE SHOE 1.10 1 JT 8-5/8 32# 33.97 1 FLOAT COLLAR 1.62 48 JTS 8-5/8 32# 1662.94 58 JTS 8-5/8 24# 2021.00 8 JTS 8-5/8 32# 272.57 3993.20 8-5/8" SET @ KB - 3988' W/400 SKS REG. 50/50 POZMIX 6% GEL + 100 SKS REG W/2# HAS - PLUG DOWN 4:15AM 5-1-63 TESTED TO 2000# FOR 30 MIN AFTER 24 HRS. </p> | | | | | | |
| Witnessed by MILO M. ENFIELD | | Position TOOL PUSHER | | Company CACTUS DRILLING CO. | | |
| FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY | | | | | | |
| ORIGINAL WELL DATA | | | | | | |
| D F Elev. | | T D | | P B T D | | 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 | | | | I hereby certify that the information given above is true and complete to the best of my knowledge. | | |
| Approved by | | | | Name H.S. WRIGHT | | |
| Title | | | | Position SUPERINTENDENT | | |
| Date | | | | Company T.F. HODGE | | |