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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 Cities Service Petroleum Company | | | Address Box 97, Hobbs, New Mexico | | | |
| Lease D.C.S.U. Tract 32 | Well No. 2 | Unit Letter B | Section 2 | Township 14-S | Range 31-E | |
| Date Work Performed 9-12 thru 9-18-62 | Pool Caprock-Queen | County Chaves | | | | |

THIS IS A REPORT OF: (Check appropriate block)

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

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

This well formerly known as Chaves State BS No. 1 TD 3095' - sand, was completed as a dry hole. The D.C.S.U. purchased this well from Gulf Oil Corporation and was re-completed as a water injection well with the following equipment being used and work done: cleaned out to TD 3095', ran 101 jts. of used 2" EUE 4.7# 8R J-55 SS cement lined tubing or 3043' set @ 3047' w/Brown Oil Tool Packer. Effective 9-18-62 date of first water injected.

1-1-63

| | | |
|--------------------------------------|----------------------------------------|----------------------------------------------------|
| Witnessed by J. L. Russell | Position Asst. Prod. Foreman | Company Cities Service Petroleum Company |
|--------------------------------------|----------------------------------------|----------------------------------------------------|

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

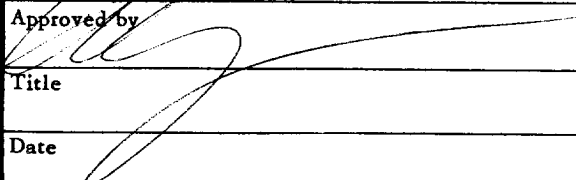
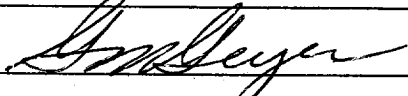
| | | | | |
|------------------------|--------------|------------------------|--------------------|-----------------|
| D F Elev. | TD | PBTD | Producing Interval | Completion Date |
| Tubing Diameter | Tubing Depth | Oil String Diameter | Oil String Depth | |
| Perforated Interval(s) | | | | |
| Open 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  |
| Title | Position Dist. Supt. |
| Date | Company Cities Service Petroleum Company |