

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 110a)

| | | | | | | |
|--|------------------------------|--|----------------------|------------------------|---------------------|--|
| Name of Company Graridge Corporation | | Address Box 752, Breckenridge, Texas | | | | |
| Lease North Caprock Unit 1 | Well No. 7-10 | Unit Letter J | Section 7 | Township 13S | Range 32E | |
| Date Work Performed 2-24-60 | Pool Caprock Queen | | County Lea | | | |

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations ☐ Casing Test and Cement Job ☒ Other (Explain):
☐ Plugging ☐ Remedial Work **See below**

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

Started injecting water in this well on February
24, 1960 for waterflood operations in this area.

COPY

| | | |
|--------------------------------------|-----------------------------------|--|
| Witnessed by Paul Holloway | Position Superintendent | Company Graridge Corporation |
|--------------------------------------|-----------------------------------|--|

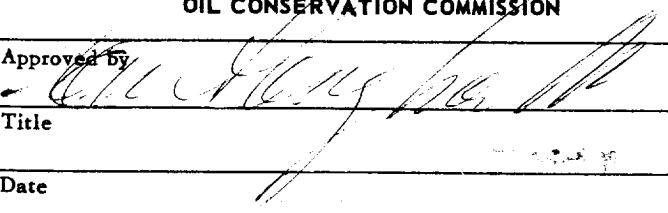
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

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 Charles W. Smith | | |
| Title Production Clerk | Position Charles W. Smith | | |
| Date | Company Graridge Corporation | | |