

| | |
|---------------------------|-----|
| NUMBER OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| PRODUCTION OFFICE | |
| OPERATOR | |

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

HOBBS OFFICE O.C.C. MISCELLANEOUS REPORTS ON WELLS

May 8 7 02 AM '64
(Submit to appropriate District Office as per Commission Rule 1106)

| | | | | | | | |
|--|-----------------------------|--------------------|--------------|--|-----------------|--|--|
| Name of Company HUMBLE OIL & REFINING COMPANY | | | | Address Box 2100, Hobbs, New Mexico 88240 | | | |
| Lease South Four Lakes Unit | Well No. 6 | Unit Letter "I" | Section 2 | Township T-12-S | Range R-34-E | | |
| Date Work Performed May, 1964 | Pool Four Lakes Devonian | | | County Lea | | | |

THIS IS A REPORT OF: (Check appropriate block)

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

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

Well Shut-In. Excessive Water Production. Possible remedial work being studied.

| | | |
|---------------------------------|----------------------------------|--|
| Witnessed by Joe C. Sherrill | Position Field Superintendent | Company HUMBLE OIL & REFINING COMPANY |
|---------------------------------|----------------------------------|--|

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

| | | | | |
|------------------------|--------------|---------------------|------------------------|-----------------|
| D F Elev. | T D | P BTD | 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 | |
| Date | | Company | |
| | | HUMBLE OIL & REFINING COMPANY | |