NUMBER OF CO	USE SCRIVED					·					
	STRIBUTIÓN				•		-				
SANTA FI									FORM C-103		
									(Rev 3-55)		
TRANSPORTER											
	AATION OFFICE										
Name of Com	anv				Addre	ess		- pm - 2	49		
		Compl	any-Sinela	r off A	Gas Co.	202	UN +	3 PM C Comer. M	idiand.	Texas	
Lease				Well No.	Unit Letter	Section	Township		Ran		
	,is- state			1=30	A	30		<u>-S</u>		<u>34-E</u>	
Date Work Performed Pool				19 1			County				
Hes Reton					OF: (Check	. approprio	te block)				
Beginnin	g Drilling O	perations			nd Cement Jo			Explain):		<u></u>	
Pluggin	,	-		emedial Work	:						
			ure and quantity			aulta abta	inad			····	
						Suits ODIA	inea.				
Cement	plugs_spo	stied	5-14-62 as	Iellows:							
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	10 🗊	ce t	op of surfa	lce.							
Steel m	arker pla	need in	n top. Pit	ta vill b	e f!lled	and lo	cation o	:leaned	and let	veled when	
pits ar			-								
Witnessed by				Position		I	Сотрапу				
"Incosed by											
			FILL IN BE	LOW FOR	REMEDIAL	WORK RE	PORTS 0	NLY	····		
					INAL WELL	DATA					
D F Elev.	DF Elev. T D			PBTD			Producing Interval		C	ompletion Date	
				I) al-	
Tubing Diame	ter	1.1	Tubing Depth		Oil Stri	ing Diame	ter	Oil S	string Dep	th	
Perforated Int					I					· · · · · · · · · · · · · · · · · · ·	
Periorated Int	ervai(s)										
Open Hole Int	erval				Produc	ing Forma	tion(s)				
open more antervar											
				RESUL	TS OF WOR	KOVER					
	Date of	:	Oil Productio	n Gas	Production	Water P	roduction	GC		Gas Well Potential	
Test	Test		BPD	M	CFPD		PD	Cubic fe		MCFPD	
Before											
Workover											
After Workover											
workover					17.	<u> </u>		<u> </u>		<u></u>	
	01 001				l her to the	eby certify e best of i	y that the in my knowled	ntormation g ge.	iven abov	e is true and complete	
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Approved by	2.1/		1/		Name		(DI	1		· · · · · · · · · · · · · · · · · · ·	
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Title		· · · · · · · · · · · · · · · · · · ·			Positi	ion //	7				
			Division Superintendent								
Date					Compa	any		-			
		÷	-				and Cri	ude OII	Connan	Y	