Form C-103
(Revised 3-55)

NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS   HOBBS OFFICE OCC
(Submit to appropriate District Office as per Commission Rule 1106)
                                                          OCT 29 PM 2:57

COMPANY **Cities Service Production Co.**   Box 97, Hobbs, New Mexico
                        (Address)

LEASE **Taylor B**   WELL NO. **3**   UNIT **J** S **7**   T **12-S**   R **38-E**
DATE WORK PERFORMED 10-25-57 and   POOL   **Undesignated**
                     10-27-57

This is a Report of: (Check appropriate block)   [X] Results of Test of Casing Shut-off

        [ ] Beginning Drilling Operations   [ ] Remedial Work

        [ ] Plugging   [ ] Other _____

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

**This well was drilled to 4486' in dolomite. Ran 140.4 jts. (4469.61) of 8 5/8" OD 32#
8R H-40 & J-55 SS casing set at 4485.61. Cemented with 1016 sacks Incor with 40% Diacel
plus 11 sacks Calcium Chloride plus 200 sacks neat on bottom. Plug was down at 8:00 PM
October 25, 1957. Cement did not circulate. Top of cement was located by temperature
survey at 610'. Cement was allowed to set 48 hours prior to testing for shut-off. Prior
to drill plug, 1500# pressure was applied during a 30 minute interval with no drop in
pressure. After drilling plug, 500# pressure was applied with no drop in pressure.
Drilling resumed.**

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY
Original Well Data:

DF Elev. _____ TD _____ PBD _____ Prod. Int. _____ Compl Date _____

Tbng. Dia _____ Tbng Depth _____ Oil String Dia _____ Oil String Depth _____

Perf Interval (s) _____

Open Hole Interval _____ Producing Formation (s) _____

RESULTS OF WORKOVER: BEFORE   AFTER

Date of Test   _____   _____

Oil Production, bbls. per day   _____   _____

Gas Production, Mcf per day   _____   _____

Water Production, bbls. per day   _____   _____

Gas-Oil Ratio, cu. ft. per bbl.   _____   _____

Gas Well Potential, Mcf per day   _____   _____

Witnessed by _____ _____
                                                          (Company)

        OIL CONSERVATION COMMISSION   I hereby certify that the information given
                                           above is true and complete to the best of
                                           my knowledge.
Name _____   Name _____
Title _____   Position __Dist. Supt.__
Date _____   Company _Cities Service Production Co._