
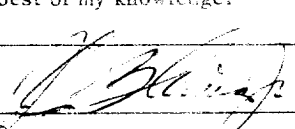


## NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company <b>TEXACO Inc.</b>		Address <b>P.O. Box 352, Midland, Texas</b>				
Lease <b>State of N.M. "0" NCT-3</b>	Well No. <b>21</b>	Unit Letter <b>G</b>	Section <b>12</b>	Township <b>17-N</b>	Range <b>32-E</b>	
Date Work Performed <b>March 27, 1960</b>	Pool <b>Roberts</b>			County <b>Lea</b>		
THIS IS A REPORT OF: (Check appropriate block)						
<input type="checkbox"/> Beginning Drilling Operations		<input checked="" type="checkbox"/> Casing Test and Cement Job		<input type="checkbox"/> Other (Explain):		
<input type="checkbox"/> Plugging		<input type="checkbox"/> Remedial Work				
Detailed account of work done, nature and quantity of materials used, and results obtained. <p style="text-align: center;"><b>TD -- 1350'</b></p> <p style="text-align: center;"><b>Spudded 9-7/8" hole 12:30 A.M., March 25, 1960.</b></p> <p><b>Ran 1340' of 7-5/8" O.D. casing 24:00 lb, H-40, 8R, and cemented at 1350' with 400 sx 4 1/2 gal and 100 sx regular. Plug at 1333'. Job complete 12:30 P.M., March 26, 1960.</b></p> <p><b>Tested 7-5/8" O.D. casing with 600 PSI for 30 minutes from 1:00 to 1:30 P.M. March 27, 1960. Tested O.K. Drilled cement plug and re-tested for 30 minutes from 3:30 to 4:00 PM March 27, 1960 with 600 PSI. Tested O.K. Job complete 4:00 P.M., March 27, 1960.</b></p>						
Witnessed by		Position		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 <b>Assistant District Superintendent</b>		
Date				Company <b>TEXACO Inc.</b>		