

Form **C-103**  
(Revised 8-55)

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY N. B. Hunt P. O. Box 192 Midland, Texas  
(Address)

LEASE State of New Mexico WELL NO. 1 UNIT D S 14 T 15-S R 34-E  
DATE WORK PERFORMED 6-13-54 POOL Lea County, New Mexico

This is a Report of: (Check appropriate block) ☒ Results of Test of Casing Shut-off  
☐ Beginning Drilling Operations ☐ Remedial Work  
☐ Plugging ☒ Other Set Inter Casing

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

Set 9-5/8" OD 32 & 36# J-55 Casing at 4659 with 1800 sacks of 8% Gel and 200 sacks neat. Casing tested to 1500# for 30 minutes. No pressure drop.

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 E. F. Wicker  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Name W. L. Barton  
Position District Superintendent  
Company N. B. Hunt