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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 Sinclair Oil & Gas Company | | Address 520 E Broadway, El Paso, New Mexico | |
| Lease Red Fort | Well No. 1 | Unit Letter 3 | Section 22 |
| Date Work Performed see below | Pool Undesignated | Township 15N | Range 22E |
| County El Paso | | | |

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.

8-15-61 Set 1800' of 9-5/8" CD 1-1/2 Casing (1457' of 364 & 1403' of 100) at 1800' and cemented w/1000 sacks 50/50 pos. & 40 gal & 200 lbs reg ment 2% gal cement. Completed at 10:45 AM 8-15-61. Cement circulated to surface. WUB.

8-17-61 Tested casing w/1000 lbs pump pressure for 30 mins before & after drilling out cement - no decrease in pressure - tested OK.

| | | |
|-------------------------------------|----------------------------|--|
| Witnessed by W.A. Russell | Position Foreman | Company Sinclair Oil & Gas 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 Weight | 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.

Name
W. A. Russell

Position
Dist Supt

Company
Sinclair Oil & Gas Company