Form C-103. (Revised 3-55)

## NEW MEXICO OIL CONSERVATION COMMISSION MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1706)

| СОМРА       | NY Magnolia Pet                | troleum Compar | ny, Box          | 727, Ker  | mit         | , Tex | as          |                |        |        |             |
|-------------|--------------------------------|----------------|------------------|---|-------------|-------|-------------|----------------|--------|--------|-------------|
|             |                                | (1             | Address          | 3)  |             |       |             |                |        |        |             |
| LEASE       | State Bridges                  | WELL NO        | o. <b>75</b>     | TINU  | J           | S     | 11          | T              | 178    | R      | 34 <b>E</b> |
| -<br>DATE V | WORK PERFORME                  | D 7/18-20/5    | 55               | POOL  | V           | acum  | 1           |                |        |        |             |
|             |                                |                |                  |   |             |       |             |                |        |        |             |
| This is     | a Report of: (Che              | ck appropria   | te blocl         | c) 1  | R           | esult | s of        | Test           | of Ca  | sing S | Shut-of     |
|             | Beginning Drillin              | ng Operations  | <b>3</b>         |   | R           | emed  | lial V      | Work           |        |        |             |
|             | Plugging                       |                |                  | <u> </u>  |             | ther  |             |                |        |        |             |
| <b>L</b>    | Tr ragging                     |                |                  | <u> </u>  |             |       |             |                |        |        |             |
| Detaile     | account of work                | done, nature   | and qua          | antity of   | ma          | teria | ıls us      | s <b>e</b> d a | nd re  | sults  | obtaine     |
|             | N BELOW FOR RE<br>1 Well Data: | MEDIAL WO      | RK RE            | PORT <b>Š</b> (   | ОЙІ         | Υ     |             |                |        |        |             |
| DF Ele      |                                | PBD            | E                | Prod. Int   | ŀ.          |       |             | Com            | pl Dai | te     |             |
|             |                                |                |                  | tring Dia   |             |       |             |                |        |        |             |
| Ū           | terval (s)                     |                |                  | 6   |             |       | <del></del> |                | Ü      | • -    |             |
|             | ole Interval                   | Pro            | ducing 1         | Formati   | on (        | (s)   |             |                |        |        |             |
| R FSIII.    | TS OF WORKOVE                  | ₹ •            | <del></del>      | · · · · · · · · · · · · · · · · · · ·   | <del></del> | BE    | FOR         | E              | A      | FTE    | ?           |
|             |                                |                |                  |   |             |       |             |                |        |        |             |
| Date of     |                                | •              |                  |   |             |       |             | -              | _      |        |             |
|             | duction, bbls, per             | ·              |                  |   |             |       |             | _              | _      |        |             |
|             | oduction, Mcf per              |                |                  |   |             |       |             | _              |        |        | <del></del> |
|             | Production, bbls.              | _              |                  |   |             |       |             |                |        |        |             |
| Gas-Oi      | l Ratio, cu. ft. pe            | r bbl.         |                  |   |             |       |             | _              |        |        |             |
| Gas We      | Il Potential, Mcf              | per day        |                  |   |             |       |             |                | _      |        | <del></del> |
| Witness     | sed by                         |                |                  |   | <del></del> |       |             | (Car           |        |        |             |
| OII Name/   | L CONSERVATION<br>Tambey       | COMMISSIO      | oN ab<br>m<br>Na | (Company)  I hereby certify that the information given above is true and complete to the best of my knowledge.  Name  Position  District superintendent |             |       |             |                |        |        |             |
| Doto -      | Engineer District              |                |                  | omnany  |             |       |             |                | - 4    |        |             |