

NEW MEXICO OIL CONSERVATION COMMISSION

FORM O-103
(Rev. 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit in duplicate to District Office as per Commission Rule 1106)

Name of Company Sinclair Oil & Gas Company		Address 520 E Broadway, Hobbs, New Mexico				
Lease State Lea 697	Well No. 1	Unit Letter L	Section 14	Township 18S	Range 34E	
Date Work Performed see below	Pool Wildcat	County Lea				

THIS IS A REPORT OF: (Check appropriate block)

☐ Beginning Drilling Operations☐ Casing Test and Cement Job☒ Other (Explain):☐ Drilling☐ Remedial Work**DST's and Plugging and Abandoning**

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

- 12-4-60 DST #1 - Queen-4375-4450, 5/8x1" chokes. No water cushion. Tool open 1 hr. No blow. by passed tool after 30 mins, no blow. Recovered 30' drilling mud. 30 min ISIP 280#, IFP 100#, FFP 100#, 60 min FSIP 120#.**
- 10-7-60 DST #2 - Queen 4695-4770, 5/8x1" chokes. No water cushion. Tool open 1 hr. No blow. by passed tool after 30 mins, no blow. Recovered 5' dry mud, 30 min ISIP 85#, IFP 45#, FFP 45#, 1 hr FSIP 45#.**
- 10-11-60 DST#3 - San Andres, 5135-5200, 5/8x1" chokes. No water cushion. Open 1 hr w/weak blow. Recovered 120' mud cut water (75% water, 25% mud). 30 min ISIP 1940#, IFP 116#, 2 hr FSIP 1818#.**
- 10-13-60 Set 25 sack cement plug at each of following: 5119-5200, 4383-4463, 3205-3285, 1840-1920, 310-390 and 15 sack cement plug in top of 8-5/8" csg and bottom of cellar, w/regulation marker extending 4' above surface level. PLUGGED AND ABANDONED.**

Witnessed by Vernon R. Black	Signature Foreman	Company Sinclair Oil & Gas Company
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FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY
ORIGINAL WELL DATA

DE Elev.	TD	RTD	Drilling Interval	Completion Date
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Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth
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Perforated Interval(s):

Open Hole Interval	Producing Formations:
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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 <i>[Signature]</i>	Name <i>[Signature]</i>
Title	Position Asst. Dist. Supt.
Date	Company SINCLAIR Sinclair Oil & Gas Company

Orig: 2cc: OCC; cc: HFD, JM, File; cc: State Land Office