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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<br><b>C. H. Sweet Oil Company</b>      |                       | Address<br><b>Box 1115, Hobbs, New Mexico 88240</b> |                      |
| Lease<br><b>C. H. Sweet Oil Company Well Grines 3-</b> | Well No.<br><b>3-</b> | Unit Letter<br><b>I</b>                             | Section<br><b>20</b> |
| Date Work Performed<br><b>None</b>                     |                       | County<br><b>Lea</b>                                | Range<br><b>38E</b>  |

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations
 ☐ Casing Test and Cementing
 ☐ Other (Explain):
- ☐ Plugging
 ☐ Remedial Work

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

**We have no immediate plans for this well. Request it continued on Temporarily Abandonment.**

|              |          |         |
|--------------|----------|---------|
| Witnessed by | Position | Company |
|--------------|----------|---------|

### FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

#### ORIGINAL WELL DATA

|                        |              |                        |                    |                 |
|------------------------|--------------|------------------------|--------------------|-----------------|
| D F Elev.              | T D          | P B T E                | Producing Interval | Completion Date |
| Tubing Diameter        | Tubing Depth | Casing 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                                                                                            |  |
| Date                        |  | Company                                                                                             |  |

**Clerk**

**C. H. Sweet Oil Company**