

| | |
|---------------------------|-----|
| NUMBER OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| PRODUCTION OFFICE | |
| OPERATOR | |

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 TEXACO Inc. | | Address P. O. Box 728 - Hobbs, New Mexico | |
| Lease State of New Mexico "CR" | Well No. 3 | Unit Letter L | Section 32 |
| Date Work Performed September 8, 1964 | Pool Lusk Strawn | Township 19-S | Range 32-E |
| | | County Lea | |

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.

Total Depth - 11,500'
8 5/8" O. D. Casing Cemented at 3900'

Ran 11,486' of 4 1/2" O. D. Casing, 11.60 Lb., J-55, NEW and cemented at 11,499' with 300 Sx. Cl "C" 4% gel with retarder and FRA. Plug at 11,469'.
Job Complete 9:20 A. M. September 8, 1964.

Tested 4 1/2" O. D. Casing for 30 minutes with 1000 P. S. I. from 4:00 P. M. to 4:30 P. M. September 11, 1964. Tested O. K. Job complete September 11, 1964.

| | | |
|-------------------------------|------------------------------|------------------------|
| Witnessed by H. H. Addison | Position Drilling Foreman | Company TEXACO Inc. |
|-------------------------------|------------------------------|------------------------|

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA


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

| | |
|--|--|
| Approved by  | Name H. D. Raymond |
| Title | Position Assistant to the District Superintendent |
| Date | Company TEXACO Inc. |