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NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

HOBBS OFFICE O. C. C.

(Submit to appropriate District Office as per Commission Rule 120697 PH '64)

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	Township 19-S	Range 32-E		
Date Work Performed August 11, 1964	Pool Lusk Strawn			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 - 3900'
11 3/4" O. D. Casing Cemented at 917'

Ran 3885' of 8 5/8" O. D. Casing, 24.00 LB, J-55, NEW, and cemented at 3900', with DV tool set at 2796', cemented first stage with 350 Sx. Class "C" 12% gel, plus 150 Sx. Class "C" neat. Plug at 3867'. Cement Circulated. Cement second stage with 150 Sx. Class "C" 12% gel, plus 100 Sx. Class "C" neat. Job complete 4:45 P. M. August 5, 1964.

Tested 8 5/8" O. D. Casing for 30 minutes with 1000 P. S. I. from 2:30 A. M. to 3:00 A. M. August 8, 1964. Tested O. K. Drilled DV tool and tested for 30 minutes with 1000 P. S. I. from 10:00 A. M. to 10:30 A. M. August 8, 1964. Tested O. K. Drilled cement plug and tested for 30 minutes with 1000 P. S. I. from 11:00 A. M. to 11:30 A. M. August 8, 1964. Tested O. K. Job complete 11:30 A. M. August 8, 1964.

Witnessed by H. H. Addison	Position Drilling foreman	Company TEXACO Inc.
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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 <i>Lester A. Clement</i>	Name <i>W. E. Morgan</i>
Title	Position W. E. Morgan Assistant to the District Superintendent
Date	Company TEXACO Inc.