

NOTE: THIS IS TO BE A SALT WATER DISPOSAL WELL

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| NUMBER OF COPIES RECEIVED DISTRIBUTION | | NEW MEXICO OIL CONSERVATION COMMISSION | | | | FORM C-103 (Rev 3-55) | |
| SANTA FE FILE U.S.S. LAND OFFICE TRANSPORTER PRODUCTION OFFICE OPERATOR | | 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 "AA" NCT-4 | | Well No. SWD-1 | Unit Letter B | Section 10 | Township 18-S | Range 34-E | |
| Date Work Performed September 3, 1964 | | Pool Vacuum (SWD WELL) | | | County Lea | | |
| THIS IS A REPORT OF: (Check appropriate block) | | | | | | | |
| <input type="checkbox"/> Beginning Drilling Operations | | <input checked="" type="checkbox"/> Casing Test and Cement Job | | <input type="checkbox"/> Other (Explain): | | | |
| <input type="checkbox"/> Plugging | | <input type="checkbox"/> Remedial Work | | | | | |
| Detailed account of work done, nature and quantity of materials used, and results obtained. | | | | | | | |
| Total Depth - 5100' 8 5/8" O. D. Casing Cemented at 383' | | | | | | | |
| Ran 5087' of 5 1/2" O. D. Casing, 14 LB., J-55, NEW and Cemented at 5100' with 350 Sx. Incor 4% gel. Plug at 5057'. Job complete 3:30 P. M. September 3, 1964. | | | | | | | |
| Tested 5 1/2" O. D. Casing for 30 minutes with 1500 P. S. I. from 3:15 P. M. to 3:45 P. M. September 4, 1964. Tested O. K. Drilled Cement Plug and re-tested for 30 minutes with 1500 P. S. I. from 10:30 P. M. to 11:00 P. M. September 4, 1964. Tested O. K. Job complete 11:00 P. M. September 4, 1964. | | | | | | | |
| Witnessed by B. C. O'Kief | | Position Asst. Prod. 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 <i>H. D. Raymond</i> | | | |
| Title | | | | Position H. D. Raymond Assistant to the District Superintendent | | | |
| Date | | | | Company TEXACO Inc. | | | |