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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)*

JAN 13 9 18 AM '64

Name of Company <b>SOCONY MOBIL OIL COMPANY, INC.</b>				Address <b>P. O. Box 1800, Hobbs, New Mexico</b>			
Lease <b>State Bridges</b>		Well No. <b>3</b>	Unit Letter <b>0</b>	Section <b>23</b>	Township <b>17 S</b>	Range <b>34 E</b>	
Date Work Performed <b>1/1/64</b>		Pool <b>Vacuum (G-S.A.)</b>			County <b>Lea</b>		

THIS IS A REPORT OF: (Check appropriate block)

<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Casing Test and Cement Job	<input checked="" type="checkbox"/> Other (Explain):
<input type="checkbox"/> Plugging	<input type="checkbox"/> Remedial Work	<b>Temporarily abandoned</b>

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

TD: 4608'

Held for possible secondary recovery.

Witnessed by	Position	Company
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**FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY**

**ORIGINAL WELL DATA**

DF Elev.	TD	PBTD	Producing Interval	Completion Date
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Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth
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Perforated Interval(s)

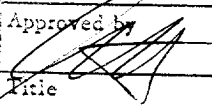
Open Hole Interval	Producing Formation(s)
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**RESULTS OF WORKOVER**

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 	Name <b>J. J. McDaniel</b>
Title	Position <b>Group Supervisor</b>
Date	Company <b>Socony Mobil Oil Company, Inc.</b>