NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103 (Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

| | (5 | Submit to approp | riate Distr | rict Office as | | mission R | | '.f | | |
|---|---------------------------------------|--------------------------|-------------|---------------------------|---|----------------------------|-----------|----------------------------------|---------------|--|
| Name of Company C. V. TRAINER | | | | Address P. 0. | | | s 6 10 3 | -53- | 58 | |
| Lease | <u> </u> | | Well No. | Unit Letter | | Township | | Range | Mexico | |
| | Signal St | | 2 | C | 22 | 19-5 | | | Rest | |
| Date Work Per 12-1 | | Pool | Outen | | | County | •• | | | |
| 12-10-59 Pearl Queen Lea THIS IS A REPORT OF: (Check appropriate block) | | | | | | | | | | |
| Beginning Drilling Operations Casing Test and Ce | | | | | ement Job Other (Explain): | | | | | |
| Plugging | Plugging Remedial Work | | | | | | | | | |
| 12-10-59 Set 4½", 9.5# casing 6 4930' and cemented w/100 sr. 1-1 Pozmix, 2% Gel, & 2% Calcium Chloride. Pumped plug down w/500 gallons 7½% MCA 6 11:45 PM 12-10-59. Pressure tested w/1500 psi. Held OK. Top of cement 6 4200'. | | | | | | | | | | |
| Witnessed by C. W. Trainer Position Owner FILL IN BELOW FOR REME | | | | | | | | | | |
| D F Elev. | D D | | | | | | | | | |
| DI Elevi | | T D | | PBTD | | Producing Interval | | Completion Date | | |
| Tubing Diameter | | Tubing Depth | | Oil String Dian | | ter | Oil Strin | Oil String Depth | | |
| Perforated Inte | erval(s) | | | | | | | | | |
| Open Hole Interval | | | | | Producing Formation(s) | | | | | |
| | | | RESUL | TS OF WOR | COVER | | | | | |
| Test | Date of Test | Oil Production Ga BPD | | Gas Production W MCFPD | | ater Production BPD Cub | | GOR Get Gas Well Potential MCFPD | | |
| Before Workover | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| After Workover | | | | | | | | | | |
| OIL CONSERVATION COMMISSION | | | | I here to the | I hereby certify that the information given above is true and complete to the best of my knowledge. | | | | | |
| Approved by | | | | Name | Name EW In ainer | | | | | |
| Title Control of the | | | | | Position C. W. Trainer Owner - Operator | | | | | |
| Date ලව්ම | | | | Compa | C. W. TRAINER | | | | | |