

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 C. W. TRAINER		Address P. O. Box 2222, Hobbs, New Mexico				
Lease Signal State	Well No. 2	Unit Letter C	Section 22	Township 19-South	Range 35-East	
Date Work Performed 11/25-26/59	Pool Pearl Queen	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.

Spudded 11-25-59.**Set 8 5/8" casing @ 105' and cemented w/3 yds concrete.****Circulated concrete.****Pressure tested w/500 psi for 30 mins. Held OK.**

Witnessed by C. O. Coker	Position Drlg. Supt.	Company R. M. Moran Drlg. Corp.
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FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

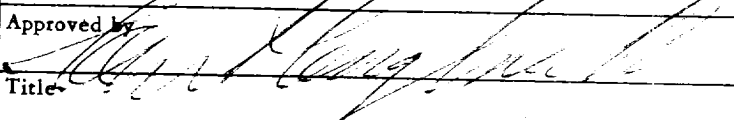
D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

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 	Name C. W. Trainer
Title Owner - Operator	Position C. W. Trainer
Date 11/26/59	Company C. W. TRAINER