| NUMBER OF CO  | PIES PECEIVED         |              |                                |               |                        |   |  |                         |                 |                          |  |
|---|-----------------------|--------------|--------------------------------|---------------|------------------------|---|--|-------------------------|-----------------|--------------------------|--|
| SANTA FE FILE U.S.G.S. LAND OFFICE  |                       |              |                                |               |                        | OIL CONSERVATION COMMISSION FORM C-103 (Rev 3-55) |  |                         |                 |                          |  |
| TRANSPORTER OIL MISCELLANEOUS REPORTS ON WELLS  |                       |              |                                |               |                        |   |  |                         |                 |                          |  |
| PRORATION OF  | FICE                  |              | (Submit to                     | appropriate L | istric                 | t Office  | as per Con                               | mission Ru              | le 1106.        | )_                       |  |
| Name of Com<br>Socony   |                       | Company, In  | ic.                            |               |                        |   | Hobbs,                                   | New Mexi                |                 |                          |  |
|   |                       |              |                                |               |                        | Letter Section Township Range 35 E                |  |                         |                 |                          |  |
| Date Work Po  | rformed<br>thru 1/16/ | 63 Pool      | Undesign                       | nated 5       | 1111                   | 11 1  | County                                   |                         | <del></del>     |                          |  |
|   |                       |              |                                | REPORT OF: (  |                        |   | te 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. |                       |              |                                |               |                        |   |  |                         |                 |                          |  |
| Reverse Witnessed by  | y Lite Wat            | FILL         | Finity 108 hrs                 | Inferno nea   | orema                  | Plug d<br>liner                                   | own @ 11<br>w/2500#<br>Company<br>Socony | .:30 PM 1/<br>for 30 mi | /11/63          | Tested OK.               |  |
|   |                       |              |                                | ORIGINAL V    |                        |   |  |                         |                 |                          |  |
| D F Elev. T D   |                       |              | PBTD                           |               |                        | Producing Interval                                |  | Co                      | Completion Date |                          |  |
| Tubing Diameter Tu  |                       | Tubing D     | Tubing Depth                   |               | Oil String Diame       |   | er                                       | Oil String              |                 | Depth                    |  |
| Perforated In   | terval(s)             |              | ·                              |               |                        |   |  |                         |                 | 7.4.7                    |  |
| Open Hole Interval  |                       |              |                                |               | Producing Formation(s) |   |  |                         |                 |                          |  |
|   |                       |              |                                | RESULTS OF    | WORK                   | OVER  |  |                         |                 |                          |  |
| Test  | Date of<br>Test       |              | Production Gas Prod<br>BPD MCF |               |                        |   | roduction<br>PD                          | GOR<br>Cubic feet       |                 | Gas Well Potential MCFPD |  |
| Before<br>Workover  |                       |              |                                |               |                        |   |  |                         |                 |                          |  |
| After<br>Workover   |                       |              |                                |               |                        |   |  |                         | -               |                          |  |
|   | OIL CONS              | ERVATION COM | MISSION                        |               | I here<br>to the       | by certify<br>best of                             | that the in                              | formation give          | en above        | e is true and complete   |  |
| Approved by   |                       |              |                                |               | Name MA Maria          |   |  |                         |                 |                          |  |
| Title   |                       |              |                                |               | Position Supervisor    |   |  |                         |                 |                          |  |
| Date  |                       |              |                                |               | Compa                  |   | + 13 GT                                  |                         |                 |                          |  |
|   | e e                   |              |                                |               |                        |   | b11 011                                  | Company,                | Inc.            |                          |  |