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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) 64

Name of Company <b>Big "6" Drilling Company</b>		Address % OIL REPORTS & GAS SERVICES BOX 763 HUBBS NEW MEXICO			
Lease <b>Marathon State</b>	Well No. <b>1</b>	Unit Letter <b>0</b>	Section <b>4</b>	Township <b>19 S</b>	Range <b>35 E</b>
Date Work Performed <b>2/1 to 2/3/64</b>	Pool <b>Undesignated (Scharb Bone Springs)</b>			County <b>Lea</b>	

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 2/1/64. Cemented 13 3/8" 48# H-40 casing at 404 feet with 300 sacks regular 6% Gel and 100 sacks neat 2% calcium chloride on bottom. Cement circulated. Plug down 2/2/64. WOC 24 hours and pressure tested casing with 600# for 30 minutes, test O.K.

Witnessed by <b>R. L. Brewer</b>	Position <b>Prod. Supt.</b>	Company <b>Big "6" Drilling Company</b>
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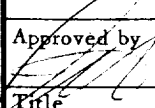
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

### ORIGINAL WELL DATA

D F Elev.	T D	P BTD	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 <b>H. L. Smith</b>	
Title		Position <b>Agent</b>	
Date		Company <b>Big "6" Drilling Company</b>	