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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)

Name of Company <b>C. W. TRAINER</b>				Address <b>P. O. Box 2222, Hobbs, New Mexico</b>			
Lease <b>Love</b>	Well No. <b>2</b>	Unit Letter <b>F</b>	Section <b>3</b>	Township <b>20-South</b>	Range <b>35-East</b>		
Date Work Performed <b>2/3-4/61</b>	Pool <b>Pearl Queen</b>			County <b>Lea</b>			

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations
 ☒ Casing Test and Cement Job
 ☒ Other (Explain): **Perforating**
- ☐ Plugging
 ☐ Remedial Work

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

**2/3-4/61 TD 5040'.**

Set 4 1/2", 11.6#, J-55, ST&C casing w/200 sx. 50-50 pozmix  
 2% Ca Chl. WOC 18 hours. Tested casing w/1600 psi for 30  
 mins. Held OK. Top cement 3580' - Temperature Survey.  
 Perforated 4959'-4965' w/24 bullets.

Witnessed by <b>C. W. Trainer</b>	Position <b>Owner-Operator</b>	Company <b>C. W. TRAINER</b>
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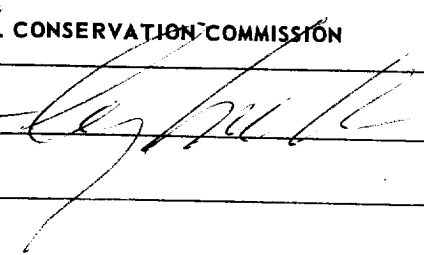
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

### 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	<b>C. W. Trainer</b>
Title		Position	<b>Owner - Operator</b>
Date		Company	<b>C. W. TRAINER</b>