

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		JOHN H. HILL						Address		c/o Oil Reports Box 763 Hobbs, N. M.																					
Lease		Orcutt State		Well No.		1		Unit Letter		C		Section		11		Township		20		Range		37									
Date Work Performed				7/1-5/59				Pool				Eumont				County				Lea											
THIS IS A REPORT OF: (Check appropriate block)																															
<input checked="" type="checkbox"/> Beginning Drilling Operations <input checked="" type="checkbox"/> Casing Test and Cement Job <input type="checkbox"/> Other (Explain):																															
<input type="checkbox"/> Plugging <input type="checkbox"/> Remedial Work																															
Detailed account of work done, nature and quantity of materials used, and results obtained.																															
Spudded well 7/4/59																															
Ran and set 32.75# 10-3/4" csg(12-1/4" hole) 324' set at 327' w/225 sx, cement circulated																															
On test pressured up to 900# for thirty minutes , tested OK																															
Witnessed by								Jim Clark								Position				Drlg Supt.				Company				Man Drlg. Co.			
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																			
												Agent																			
Title												Position																			
												JOHN H. HILL																			
Date												Company																			