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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)

1963 JUN 31 AM 8:13

Name of Company WM. G. ROSS		Address BOX 1094, MIDLAND, TEXAS	
Lease TURNER-STATE	Well No. 1	Unit 9874	Section 2
		Township 22-SOUTH	Range 3 5-EAST
Date Work Performed JUNE 25, 1963	Pool JALMAT	County LEA, NEW MEXICO	

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.

This well was fractured (Wilson Acidizing & Fracturing-Hobbs) on 6-25-63, with 23,000 gallons of lease oil and 50,000 pounds of sand. The well was overflushed with 66 barrels of lease oil. A total of 1,200 pounds of mothballs was used in the treatment. For use in the treatment, 600 barrels of lease oil was purchased from General Petroleum, Inc., of Hobbs, New Mexico, as per that company's Ticket No. 5076, dated 6-25-63. This oil was moved by General Petroleum to the Turner-State lease by General's trucks from its Eunice Treater Plant. The additional oil used was taken from the tanks on the Turner-State lease.

Witnessed by WM. G. ROSS	Position OWNER	Company WM. G. ROSS
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FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

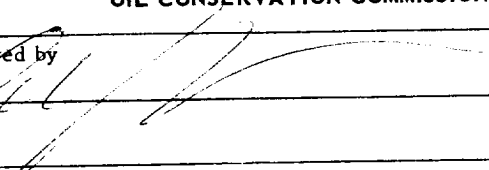
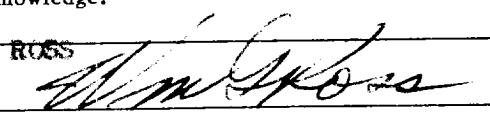
D F 3600'	T D 3956'	P B T D	Producing Interval 3847 to 3914'	Completion Date 11-23-61
Tubing Diameter 2"	Tubing Depth 2" 3858'	Oil String Diameter 1 1/2"	Oil String Depth 3956'	

Perforated Interval(s)
3847-56, 3860-64, 3868-72, 3876, 3910-13

Open Hole Interval	Producing Formation(s) YATES
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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	6-22-63	2	To small to measure	20%		
After Workover	Still recovering frac oil. A new potential test will be taken when frac oil rec.					

OIL CONSERVATION COMMISSION		I hereby certify that the information given above is true and complete to the best of my knowledge.	
Approved by 	Name WM. G. ROSS		
Title	Position OWNER		
Date	Company WM. G. ROSS		