

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2">NUMBER OF COPIES RECEIVED</td></tr> <tr><td colspan="2">DISTRIBUTION</td></tr> <tr><td>SANTA FE</td><td></td></tr> <tr><td>FILE</td><td></td></tr> <tr><td>U.S.G.S.</td><td></td></tr> <tr><td>LAND OFFICE</td><td></td></tr> <tr><td>TRANSPORTER</td><td>OIL</td></tr> <tr><td></td><td>GAS</td></tr> <tr><td>PRORATION OFFICE</td><td></td></tr> <tr><td>OPERATOR</td><td></td></tr> </table>	NUMBER OF COPIES RECEIVED		DISTRIBUTION		SANTA FE		FILE		U.S.G.S.		LAND OFFICE		TRANSPORTER	OIL		GAS	PRORATION OFFICE		OPERATOR		<h2 style="margin: 0;">NEW MEXICO OIL CONSERVATION COMMISSION</h2> <h3 style="margin: 0;">MISCELLANEOUS REPORTS ON WELLS</h3> <p style="margin: 0;">(Submit to appropriate District Office as per Commission Rule 1106)</p>	FORM C-103 (Rev 3-55)
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Name of Company Gulf Oil Corporation				Address Box 2167, Hobbs, New Mexico			
Lease J. H. Day	Well No. 4	Unit Letter E	Section 6	Township 22-S	Range 36-E		
Date Work Performed March 14, 1962	Pool Jalnet (Oil)			County Lee			

THIS IS A REPORT OF: (Check appropriate block)

<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Casing Test and Cement Job	<input checked="" type="checkbox"/> Other (Explain):
<input type="checkbox"/> Plugging	<input type="checkbox"/> Remedial Work	Temporarily Abandoned Report

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

Subject well is still carried as Temporarily abandoned. No plans have been made at this time for further work on this well.

Witnessed by	Position	Company
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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	
Title		Position Area Production Manager	
Date		Company Gulf Oil Corporation	