| NO. OF COPIES RECEIVED   |   |  | Form C-103<br>Supersedes Old<br>C-102 and C-103  |
|--|---|--|--|
| SANTA FE   | NEW MEXICO OIL CO   | NSERVATION COMMISSION  | Effective 1-1-65   |
| FILE   | 4   | Hebbs of All of the All  | [c_ 1.3)   |
| U.S.G.S.   |   | May 5 8 55 AM '83  | 5a. Indicate Type of Lease State Fee   |
| OPERATOR   | - <del> </del>  | FIA: J G JJ III CO   | 5. State Oil & Gas Lease No.   |
| J. Z.X. S.   | _   |  | B-1167   |
| (DO NOT USE THIS FORM FOR PUSE "APPLICA"   | 7, Unit Agreement Name  |  |  |
| WELL GAS WELL  2. Name of Operator   | OTHER-  |  |  |
| Southern Petroleum Exploration, Inc.   |   |  | 8. Farm or Lease Name Shell A State  |
| 3, Address of Operator   |   |  | 9. Well No.  |
| Box 1434, Roswell,   | New Mexico 88201  |  | 10 Field and Dark as Wilder  |
| UNIT LETTER  | 660 FEET FROM THE NOTE  | LINE AND 660 FEET FO   | 10. Field and Pool, or Wildcat  Eunice South   |
| ,  |   | FEET PI  |  |
| THE WEST LINE, SECT  | 10N 16 томизнір 3   | 12-8 RANGE 36-E NM   | PM. (  |
|  | 15. Elevation (Show whet  | her DF, RT, GR, etc.)  | 12, County   |
|  | 3574 GR   |  | Lea  |
|  | Appropriate Box To Indicate NTENTION TO: PLUG AND ABANDON   | Nature of Notice, Report or SUBSEQUE   | ENT REPORT OF:   |
| TEMPORARILY ABANDON  | . Too and advisor.  | COMMENCE DRILLING OPNS.  | ALTERING CASING PLUG AND ABANDONMENT   |
| PULL OR ALTER CASING   | CHANGE PLANS  | CASING TEST AND CEMENT JOB   | TOO AND ABANDORMENT  |
|  |   | OTHER  |  |
| OTHER  |   |  |  |
| 17 Describe Proposed or Completed (  | nergions (Clearly state all pertinent   | details and give postment dates include  | ing estimated date of starting any proposed  |
| log were: Tates 3128 was perforated in the 3602, 3608, 3624, and 15 percent acid followesh sand. Average is at a pressure of 2600 and the well went on Oil production happroximately 100 MCR | (+446), Seven Rivers of lower Seven Rivers of 13628. These performed by 10,000 gallons injection rate of the P. S. I. The instantant vacuum in 4-1/2 minutes increased from 8 1 | 3310 (+264), Queen 36<br>t 3553, 3556, 3564, 3<br>tions were then treat<br>of gelled brine and fracture fluid was 16<br>taneous shut down pre- | ssure was 400 P. S. I.   |
| 18. I hereby certify that the information  |   | st of my knowledge and belief.   |  |
| SIGNED BE thick  | TITLE_  | District Manager   | 5/2/69   |
| APPROVED BY CONDITIONS OF APPROVAL, IF AND   | ## TITLE  | SUPERMSOR TO COM   | DATE TO STATE OF STAT |