NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103 (Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

| | | (: | MISCL Submit to appro | | | | | mission R | e astron C | 00 | | |
|--|------------------|-------------|--------------------------|-------------|-------------------|------------------|---|-------------------------|----------------------|--------------|-------------|--|
| Name of Company Western Oil Fields, Inc. | | | | | | | ss | i servita | 3:12 | | | |
| Lease | | | | Well No | . U2 | nit Letter | Section | Township | | Range | | |
| Date Work P | Gulf Hill | | Pool | 4 | | <u> </u> | 4 | 21 | -8 | 37-E | ····· | |
| | 13. 1963 | | l . | signat | ed | | | County | les | | | |
| | | | | IS A REP | | : (Check | approprie | ite block) | | | | |
| Beginning Drilling Operations | | | Casing Te | | | | Other (| Explain): | | | | |
| Plugging | | R | Remedial Work | | | | | | | | | |
| Detailed acc | count of work de | one, na | ture and quantity | y of mater | ials use | d, and re | sults obta | ined. | | | | |
| Con | | | L 4:00 p.m. | | | | | | | | | |
| Witnessed by No witness | | | | Posit | | | Company | | | | | |
| | | | FILL IN BE | | | EDIAL V | | PORTS O | NLY | | | |
| D F Elev. T D | | | PBTD | | S WELL | WEEL DATA | | Interval | Completion Date | | | |
| | | | | | | | | , -2001, 12 | Completion Date | | | |
| Tubing Diameter Tub | | ubing Depth | | Oil Stri | Oil String Diamet | | Oil String | Oil String Depth | | | | |
| Perforated Interval(s) | | | | | | | | | | | | |
| r criorated 12 | (S) | | | | | | | | | | | |
| Open Hole Interval | | | | | | Produci | Producing Formation(s) | | | | | |
| | | | | | | 1 | - WORKOVER | | | | | |
| | B (| | 015 1 . | | | | | | T | | | |
| Test | Date of Test | | Oil Productio | on G | as Prodi MCFF | | | roduc tion PD | GOR Cubic feet/Bl | Gas Well Pot | | |
| Before Workover | | | | | | | | | | | | |
| After Workover | | | | | | | | | | | | |
| OIL CONSERVATION COMMISSION | | | | | | i here to the | I hereby certify that the information given above is true and complete to the best of my knowledge. | | | | | |
| Approved by | | | | | | Name | , , | | | | | |
| Title | <u> </u> | | | | | Da-iii | | I G. Wh | ite | | ~ <u>~</u> | |
| | | | | | | Fositi | Position Division Engineer | | | | | |
| Date | | | | | | Compa | Company | | | | | |
| | ·· | | | | | | | tern Oi | l Fields, | Inc. | | |