

HOBBS OFFICE O. C. C.  
NEW MEXICO OIL CONSERVATION COMMISSION  
MAY 6 3 57 PM '64  
**MISCELLANEOUS REPORTS ON WELLS**

FORM C-103  
(Rev 3-55)

(Submit to appropriate District Office as per Commission Rule 1106)

|                           |     |
|---------------------------|-----|
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| SANTA FE                  |     |
| FILE                      |     |
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| LAND OFFICE               |     |
| TRANSPORTER               | OIL |
|                           | GAS |
| PRODUCTION OFFICE         |     |
| OPERATOR                  |     |

|  |                             |                         |                      |  |                      |  |  |
|--|-----------------------------|-------------------------|----------------------|--|----------------------|--|--|
| Name of Company<br><b>Gulf Oil Corporation</b> |                             |                         |                      | Address<br><b>Box 670, Hobbs, New Mexico</b> |                      |  |  |
| Lease<br><b>A. L. Christmas NCT-A</b>          | Well No.<br><b>7</b>        | Unit Letter<br><b>0</b> | Section<br><b>27</b> | Township<br><b>22-S</b>                      | Range<br><b>36-E</b> |  |  |
| Date Work Performed                            | Pool<br><b>South Eunice</b> |                         |                      | County<br><b>Lea</b>                         |                      |  |  |

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              | <b>CI Report</b>                                     |

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

**Well still carried as closed in. No plans have been made at this time for further work on this well.**

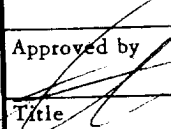
|              |          |         |
|--------------|----------|---------|
| Witnessed by | Position | Company |
|--------------|----------|---------|

**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  |              |                    |                      |                      |                    |                          |

|   |  |   |  |
|---|--|---|--|
| <b>OIL CONSERVATION COMMISSION</b>  |  | I hereby certify that the information given above is true and complete to the best of my knowledge. |  |
| Approved by<br> |  | Name<br>ORIGINAL SIGNED BY<br>C. D. BORLAND   |  |
| Title   |  | Position<br><b>Area Production Manager</b>  |  |
| Date<br><b>5/6/64</b>   |  | Company<br><b>Gulf Oil Corporation</b>  |  |