| | <u></u> | | | | | DVA | | | | | FORM C-103 | | |
|--|---|---------|-------------------------------|----------------|---------|---|--|------------------------|--|-------------|--|--|--|
| (Rev 3-55) | | | | | | | | | | | | | |
| MISCELLANEOUS REPORTS ON WELLS | | | | | | | | | | | | | |
| | (Submit to appropriate District Office as per Commission Rule 1106) | | | | | | | | | | | | |
| Name of Company Address Address | | | | | | | | | | | | | |
| T. F. Hodge Lease Well No. Ur | | | | | | 1113 Continental Bank B PLetter Section Township | | | | Range | | | |
| Chris | tmas | | | 2 | M | L | 31 | 225 | | | R-36-E | | |
| Date Work Performed Pool 10/1/59 Jalma | | | Pool Jalmat | | | | | County | Lea | | | | |
| THIS IS A REPORT OF: (Cbeck appropriate block) | | | | | | | | | | | | | |
| Beginning | Drilling Op | eration | Casi | ng Test a | nd Ceme | ent Job | (| Other (E | xplain): | | | | |
| Plugging Remedial Work Detailed account of work done, nature and quantity of materials used, and results obtained. | | | | | | | | | | | | | |
| • | e Merker | | surface high inspection | | | | | | | | | | |
| Witnessed by Position | | | | | | Company | | | | | | | |
| Weyne Herrin Dist. Proc FILL IN BELOW FOR REMEN | | | | | | | | | | | | | |
| | | | FILL IN BELL | | GINAL V | | | | 164 | | | | |
| D F Elev. T D | | | PBTD | | | Producing | | | Interval Completion Date | | | | |
| Tubing Diamete | Tubing Diameter | | Tubing Depth | | 6 | Oil String Diam | | eter Oil Str | | String Dept | ing Depth | | |
| Perforated Inte | rval(s) | | | | | | | | | | ······································ | | |
| Open Hole Interval | | | | | | Producing Formation(s) | | | | | | | |
| | | | | RESUI | LTS OF | WOR | OVER | | •••••••••••••••••••••••••••••••••••••• | | | | |
| Test | Date of Test | | Oil Production BPD | Gas Production | | | | Production PD | GOR Cubic feet/Bbl | | Gas Well Potential MCFPD | | |
| Before Workover | | | | | | | | | | | | | |
| After Workover | | | | | | = | | ······ | | | | | |
| | | | | | | | I hereby certify that the information given above is true and complete to the best of my knowledge. | | | | | | |
| Approved by Jeslie N. Clemento | | | | | | Name Warne Nerrin | | | | | | | |
| Title | / | | | | | Positi | | st. Prod | . Supt. | · | | | |
| Date | Date | | | | | | | Company T. F. Hodge | | | | | |

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