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# NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103

(Rev. 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 196506)

NOTES OFFICE 000

1965 JUN 23 PM 3:13

|   |                      |                  |              |  |               |  |  |
|---|----------------------|------------------|--------------|--|---------------|--|--|
| Name of Company<br>SOCONY MOBIL OIL COMPANY, INC. |                      |                  |              | Address<br>P. O. Box 2406, Hobbs, New Mexico |               |  |  |
| Lease<br>Brunson Argo                             | Well No.<br>10       | Unit Letter<br>M | Section<br>9 | Township<br>22 S                             | Range<br>37 E |  |  |
| Date Work Performed<br>6/1/63                     | Pool<br>Hare Simpson |                  |              | County<br>Lea                                |               |  |  |

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations
 ☐ Casing Test and Cement Job
 ☒ Other (Explain): temporarily abandoned
- ☐ Plugging
 ☐ Remedial Work

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

TD: 7901'

PBTD: 7542'

Studying for possible workover.

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

### FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

#### ORIGINAL WELL DATA

|                        |              |                        |                    |                 |
|------------------------|--------------|------------------------|--------------------|-----------------|
| D F Elev.              | T D          | P BTD                  | 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  |              |                    |                      |                      |                    |                          |

I hereby certify that the information given above is true and complete to the best of my knowledge.

|                                   |                            |   |  |
|-----------------------------------|----------------------------|---|--|
| OIL CONSERVATION COMMISSION       |                            | Name<br><i>J. McDaniel</i>                |  |
| Approved by<br><i>[Signature]</i> | File<br><i>[Signature]</i> | Position<br>Group Supervisor              |  |
| Date                              |                            | Company<br>SOCONY MOBIL OIL COMPANY, INC. |  |