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U.\$.G.5.			†	
LAND OFFICE			<del> </del>	
TRANSPORTER	OIL	·········		
IRANSPURIER	GAS			
PRORATION OFFI	CE			
OPERATOR				

## NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103 (Rev 3-55)

THANSPORTE	GAS			MISCELLANEOUS REPORTS ON WELLS								
PRORATION C	FFICE			(Subi	mit to ap;	propriate	Distric	t Office	as per Ca	ommission Rul	• 1106)	
Name of Con		<u> </u>		-			Addres	ss				<u> </u>
	l Corpora	<u>tion</u>		<del></del>		<del></del>	Pox			New Mexico		
Lease T			<del></del>		Well No.	. Unit	Letter	23	Township	•	Range 37-	E
Date Work P		45	Pool	Ti., 1 1				1	County		<del></del>	<del></del>
DRUNGHILL	er 12, 196	35	Д	Tu:		OPT OF	101b		J.e	<u>.</u>		· <del>····································</del>
☐ Beginn	ing Drilling C	Ineratio			IS A REPO							
Pluggii		per	15		Casing Test Remedial W		ent Job	**	Other (			
	ount of work	done, na	ature and				and res	ults obta	T/A Repained.	ort		<del></del>
Well sti	Il carrie	∌d <b>&amp;</b> s	close	d in.	ilo ila					s time for	furth	er work
Witnessed by Position							Company DIAL WORK REPORTS ONLY					
			FIE.	L IN DL	OR	R REMED RIGINAL W	IAL W	ORK RE	PORTS O	NLY		
D F Elev.		T D		<del></del>	P B			****	Producing	Interval	Comp	letion Date
Tubing Diame	eter	1	Tubing I	Depth			Dil Strin	g Diamet	ter	Oil String		
Perforated Int			L				**	B		VII 041.mg	3 Deben	
·										<del></del>		
Open Hole Int	erval					P	'roducin	g Format	tion(s)			
					RESU	JLTS OF	WORK	OVER	<del></del>			<del></del>
Test	Date of Test	i		Production BPD		s Producti MCFPD			roduction PD	GOR Cubic feet/B	bl G	as Well Potential
Before Workover						<u> </u>						
After Workover												
OIL CONSERVATION COMMISSION						I hereby certify that the information given above is true and complete to the best of my knowledge.						
Approved by						1	Name					
title ?						1	Position					
Date							Area Froduction Manager Company					
							Gilf	0:3. C	ornerati	i on		