Form C-103 (Revised 3-55)

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

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

| COMPAN | Y Cities Ser | vice 011 Compa | My, Box | | bs, N | ew Meccioo | <u> </u> | | · · | |
|--|-------------------------|---|------------|---|------------------------------|------------------------------------|--------------|-----------------------|--------------|---------------|
| LEACE | State P | THE T I AT | ~ ^ | TINITE | τ. | c 26 | · rr | 22-8 | R | 38 - E |
| LEASE | · | WELL N | · | _UNIT_ | · | | T_ | 2250 | _ ^_ | 70~5 |
| JATE WC | ORK PERFORM | ED 7-28-57 & | 7-30-57 | POOL | | Drinkard | - | ~ | - | |
| This is a | Report of: (Ch | eck appropria | te bloc | () [| Re | sults of ' | rest | of Ca | sing | Shut-off |
| | Beginning Drilli | na Onaration | | <u>ر</u> | — _{Re} , | medial W | Iork | | | |
| | | ng Operations | • | <u> </u> | - | | 011 | • | | |
| F | Plugging | | | | Oth | er | | | | |
| Detailed a | ccount of work | done, nature | and qua | antity of | mate | erials us | ed a | nd res | ults | obtaine |
| to set 48 was tested this weigh FILL IN F Original V DF Elev. | BELOW FOR RIVELLE Data: | d. Ping was ditesting for shids with no drosumed. EMEDIAL WO | RK RE | PORTS (| ONLY | ly 28, 19 d after d a thirty | com | Comenting plante into | e mas | allowed |
| <u> </u> | | | Oil S | tring Dia | a | Oil | Str | ing De | pth | |
| Perf Inter | · · · | | 1 | | | | | | | |
| Open Hole | e Interval | Pro | ducing. | Formati | on (s |) | | | | |
| RESULTS | OF WORKOVE | R: | | | | BEFORI | Ē | A | FTE | 3 |
| Date of Te | est | | | | | | | • | | • |
| Oil P r odu | ction, bbls. pe | r day | | | | | _ | | | |
| Gas Produ | uction, Mcf per | · day | | | • | | - | | | |
| Water Pr | oduction, bbls. | per day | | | | | | - | | |
| Gas~Oil R | Ratio, cu. ft. pe | er bbl. | | | | | - | | | |
| Gas Well | Potential, Mcf | per day | | | , | | | | | |
| Witnessed | l by | | | | | | _ | | | |
| | | | | (Company) | | | | | | |
| OIL CONSERVATION COMMISSION | | | | I hereby certify that the information given above is true and complete to the best of | | | | | | |
| | | • | | y knowle | | | | | | |
| Name | Conflict. | (Her- | | ime | Y, | Mes | u | | | |
| Title En | gineer District | | 光 | CHECK | Citi | es Servic | · 01 | 1 Comp | my | |
| Date A | | | Ž. | | Dist | riet Supe | rint | endent | | |
| | | · · · · · · · · · · · · · · · · · · · | Po | sition'- above | | ··· | , | | | |