

## NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

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

|  |                              |   |                      |                         |                      |
|--|------------------------------|---|----------------------|-------------------------|----------------------|
| Name of Company<br><b>Three States Natural Gas Co.</b> |                              | Address<br><b>Box 168 Jal, New Mexico</b> |                      |                         |                      |
| Lease<br><b>Scarborough</b>                            | Well No.<br><b>4</b>         | Unit Letter<br><b>H</b>                   | Section<br><b>23</b> | Township<br><b>26-S</b> | Range<br><b>37-E</b> |
| Date Work Performed                                    | Pool<br><b>South Leonard</b> |   |                      | County<br><b>Lea</b>    |                      |

THIS IS A REPORT OF: (Check appropriate block)

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

**X**    **Status of Well**

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

Started 6/25/50, completed 8/24/50, T.D. 3470'. Casing in well, 12½" - 160' - 50 sks.  
8" - 1230' - 100 sks. 7" 3250' - 100 sks. Shot 120 qts. Nitro from 3415' to 3462'.  
Oil and Gas from 3415' to 3462'. Well flowed untill December 1956.  
2/24/58 - Pulled tubing and temporarily abandoned. Well was not plugged as this area  
could be unitized on water flood secondary recovery used.  
Undecided at this time as to the future of this well.

Report for June 1, 1961

THIS COMMISSION MUST BE NOTIFIED  
EVER 6 MONTHS ON FORM C-103  
AS TO THE WELL STATUS AND YOUR  
FUTURE PLANS FOR THIS WELL.

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

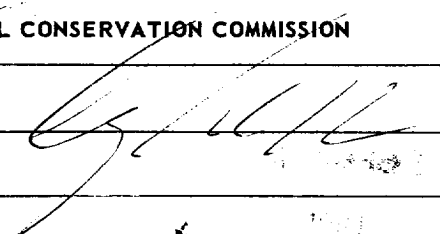
## FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

## 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  |              |                    |                      |                      |                    |                          |

|                             |   |   |   |
|-----------------------------|---|---|---|
| OIL CONSERVATION COMMISSION |   | I hereby certify that the information given above is true and complete to the best of my knowledge. |   |
| Approved by                 |  | Name  | <b>Wm. J.G. Fink</b>                    |
| Title                       |   | Position  | <b>Division Superintendent</b>          |
| Date                        |   | Company   | <b>Three States Natural Gas Company</b> |