

NUMBER OF COPIES RECEIVED

DISTRIBUTION

SANTA FE

FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

PRORATION OFFICE

OPERATOR

## NEW MEXICO OIL CONSERVATION COMMISSION.

FORM C-103

(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office for Commission Rule 1106)

Name of Company

ALBERT GACKLE, OPERATOR

Address

Box 430, Hobbs, New Mexico

Lease

Cowden

Well No.

2

Unit Letter

I

Section

30

Township

23S

Range

37E

Date Work Performed

Pool

Langlie-Mattix

County

Lea

THIS IS A REPORT OF: (Check appropriate block)

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

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

At the present time we have been unable to recover all our lead oil in this well. However, we do not wish to plug this well but rather to place it on a temporary abandonment status so that we can do remedial work on it in the future.

THE COMMISSION MUST BE NOTIFIED EVERY 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 B T D

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

Maxine Gackle - *Maxine Gackle*

Title

Position

Production Clerk

Date

Company

Albert Gackle, Operator