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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)

SEP 24 10 27 AM '63

| | | | | | | | |
|---|--|-------------------------------|-------------------------|---|------------------------|---------------------|--|
| Name of Company Amerada Petroleum Corporation | | | | Address P. O. Box 668 - Hobbs, New Mexico | | | |
| Lease Langlie Mattix Woolworth Unit | | Well No. 11-8 | Unit Letter B | Section 33 | Township 24S | Range 37E | |
| Date Work Performed 9-19-63 | | 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
 Temp. Abandon

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

Closed all valves and temporarily abandoned.

Will pull tubing at a later date.

| | | |
|--------------------------------------|------------------------------|---|
| Witnessed by H. E. Hegwood | Position Farm Boss | Company Amerada Petroleum Corporation |
|--------------------------------------|------------------------------|---|

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

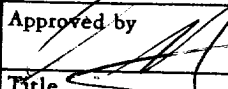
| | | | | |
|------------------------|--------------|------------------------|--------------------|-----------------|
| D F Elev. | T D | P BTD | Producing Interval | Completion Date |
| Tubing Diameter | Tubing Depth | Oil String Diameter | Oil String Depth | |
| Perforated Interval(s) | | | | |
| Open 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 H. C. Lee |
| Title | Position District Superintendent |
| Date | Company Amerada Petroleum Corporation |