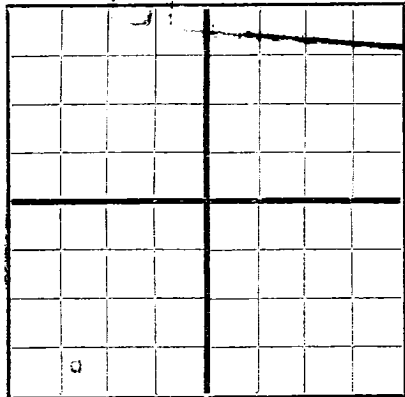


ORIGINAL
FORM C-105
TRIPPLICATE

RECEIVED
APR 25 1951
OIL CONSERVATION COMMISSION
HOBBBS-OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico



AREA 640 ACRES
LOCATE WELL CORRECTLY

WELL RECORD

Mail to Oil Conservation Commission, Santa Fe, New Mexico, or its proper agent not more than twenty days after completion of well. Follow instructions in the Rules and Regulations of the Commission. Indicate questionable data by following it with (?). SUBMIT IN TRIPLICATE. FORM C-110 WILL NOT BE APPROVED UNTIL FORM C-105 IS PROPERLY FILLED OUT.

Company or Operator _____ Address _____
Lease "E" Well No. 3 in _____ of Sec. 16 T. 25 N.
R. 12 N. M. P. M. _____ Field, _____ County.
Well is 15 feet south of the North line and 20 feet west of the East line of Section 16.
If State land the oil and gas lease is No. 2037 Assignment No. _____
If patented land the owner is _____ Address _____
If Government land the permittee is _____ Address _____
The Lessee is _____ Address _____
Drilling commenced January 18 1951 Drilling was completed March 9 1951
Name of drilling contractor _____ Address _____
Elevation above sea level at top of casing 395 feet.
The information given is to be kept confidential until _____ 19____.

OIL SANDS OR ZONES

No. 1, from _____ to _____ No. 4, from _____ to _____
No. 2, from _____ to _____ No. 5, from _____ to _____
No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet.
No. 2, from _____ to _____ feet.
No. 3, from _____ to _____ feet.
No. 4, from _____ to _____ feet.

CASING RECORD

| SIZE | WEIGHT PER FOOT | THREADS PER INCH | MAKE | AMOUNT | KIND OF SHOE | OUT & FILLED FROM | PERFORATED | | PURPOSE |
|--------|-----------------|------------------|------|--------|--------------|-------------------|------------|----|---------|
| | | | | | | | FROM | TO | |
| 1 1/2" | 24 | 8 | 21 | 310' | | | | | |
| 3 1/2" | 14 | 8 | 21 | 204' | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

MUDDING AND CEMENTING RECORD

| SIZE OF HOLE | SIZE OF CASING | WHERE SET | NO. SACKS OF CEMENT | METHODS USED | MUD GRAVITY | AMOUNT OF MUD USED |
|--------------|----------------|-----------|---------------------|--------------|-------------|--------------------|
| 2 1/2" | 4 1/2" | 300' | 22 | | | |
| 2 1/2" | 4 1/2" | 200' | 170 | 25 1/2" | | |

PLUGS AND ADAPTERS

Heaving plug—Material _____ Length _____ Depth Set _____
Adapters — Material _____ Size _____

RECORD OF SHOOTING OR CHEMICAL TREATMENT

| SIZE | SHELL USED | EXPLOSIVE OR CHEMICAL USED | QUANTITY | DATE | DEPTH SHOT OR TREATED | DEPTH CLEANED OUT |
|------|------------|----------------------------|----------|------|-----------------------|-------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Results of shooting or chemical treatment _____

RECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto.

TOOLS USED

Rotary tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet.
Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet.

PRODUCTION

Put to producing _____, 19____.
The production of the first 24 hours was _____ barrels of fluid of which _____% was oil; _____% emulsion; _____% water; and _____% sediment. Gravity, Be. _____.
If gas well, cu. ft. per 24 hours _____ Gallons gasoline per 1,000 cu. ft. of gas _____
Rock pressure, lbs. per sq. in. _____

EMPLOYEES

_____, Driller _____, Driller
_____, Driller _____, Driller

FORMATION RECORD ON OTHER SIDE

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far as can be determined from available records.

Subscribed and sworn to before me this _____ day of _____, 19____.

Notary Public
My Commission expires _____
Name _____
Position _____
Representing _____
Address _____

