| NUMBER OF CO   |                 |                                       |                             |                    |   |  | •                    |                                       |  |
|--|-----------------|---------------------------------------|-----------------------------|--------------------|---|--|----------------------|---------------------------------------|--|
| SANTA FE<br>FILE<br>U.S.G.S.   | DISTRIBUTION    |                                       | NEW MEXIC                   | O OIL C            | ONSER   | MOITAV                                 | COMMISSION           | FORM C-103<br>(Rev 3-55)              |  |
| TRANSPORTER PRORATION OF   | OIL<br>GAS      | (Su                                   | MISCELL<br>bmit to appropri |                    |   | ₩.                                     | N WELLS              | 106)                                  |  |
| FERATOR  |                 | 1,                                    |                             |                    |   |  |                      |                                       |  |
| Name of Company  ROBERT N. ENFIELD  Well No. Unit Letter Section Township Range                          |                 |                                       |                             |                    |   |  |                      |                                       |  |
| Lease  | Dabbs           | T                                     | Well No.                    | Unit Letter        | 34  | 25                                     | South                | Range 37 East                         |  |
| Date Work Pe   | _               | Pool                                  | Undesignate                 | d                  |   | County                                 | Lea                  | ļ                                     |  |
| THIS IS A REPORT OF: (Check appropriate block)   |                 |                                       |                             |                    |   |  |                      |                                       |  |
| Beginning Drilling Operations  |                 |                                       |                             |                    |   |  |                      |                                       |  |
| Plugging Remedial Work   |                 |                                       |                             |                    |   |  |                      |                                       |  |
| Detailed account of work done, nature and quantity of materials used, and results obtained.              |                 |                                       |                             |                    |   |  |                      |                                       |  |
| 5-31-62 Set 15 Jts. of 13-3/6" casing at 486' as follows: 15 Jts, 486, 48#, H-40, ST&C 510 Sx circulated |                 |                                       |                             |                    |   |  |                      |                                       |  |
| WOC 12 hours. Tested w/700# for 30 minutes. Held 0.K.  |                 |                                       |                             |                    |   |  |                      |                                       |  |
| 6-7-62 Set 120 Jts. 8-5/8" casing at 3740° as follows:   |                 |                                       |                             |                    |   |  |                      |                                       |  |
| 6-7-62 Set 120 Jts. 8-5/8" casing at 3740" as follows: 34 Jts., 32#, J-55, ST&C                          |                 |                                       |                             |                    |   |  |                      |                                       |  |
| 86 Jts., 24#, J-55, ST&C   |                 |                                       |                             |                    |   |  |                      |                                       |  |
| 1500 Sx cement. WOC 30 hours.  |                 |                                       |                             |                    |   |  |                      |                                       |  |
| 6-8-62 Tested Casing and Show, 1700# for 30. Held O.K.   |                 |                                       |                             |                    |   |  |                      |                                       |  |
|  |                 |                                       |                             |                    |   |  |                      |                                       |  |
|  |                 |                                       |                             |                    |   |  |                      |                                       |  |
|  |                 |                                       |                             |                    |   |  |                      |                                       |  |
| Witnessed by Position  |                 |                                       |                             |                    | Company   |  |                      |                                       |  |
| H. Lee Harvard Geolog  |                 |                                       |                             |                    |   |  |                      |                                       |  |
| FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY   |                 |                                       |                             |                    |   |  |                      |                                       |  |
| D F Elev. T D  |                 |                                       | PBTD                        | ORIGINAL WELL DATA |   | Producing Interval Com                 |                      | Completion Date                       |  |
|  |                 | · · · · · · · · · · · · · · · · · · · |                             |                    |   |  |                      | <u> </u>                              |  |
| Tubing Diame   | ter             | Tubing Depth                          |                             | Oil Stri           | ng Diame  | ter                                    | Oil String           | Depth                                 |  |
| Perforated Int   | erval(s)        | . <u>, l</u>                          |                             |                    | ·   | ······································ |                      | <del></del>                           |  |
|  |                 |                                       |                             |                    |   |  |                      |                                       |  |
| Open Hole Interval   |                 |                                       |                             |                    | Producing Formation(s)  |  |                      |                                       |  |
|  |                 |                                       | RESULTS                     | OF WORK            | OVER  |  |                      | · · · · · · · · · · · · · · · · · · · |  |
| Test   | Date of<br>Test | Oil Product                           |                             | oduction<br>FPD    |   | roduction<br>PD                        | GOR<br>Cubic feet/Bb | Gas Well Potential                    |  |
| Before<br>Workover   | 1681            |                                       | 1,4 C 4                     |                    |   | 1.0                                    | Subject (CCC) 2D     |                                       |  |
| After<br>Workover  |                 |                                       |                             |                    | <del></del>   | <del></del>                            |                      | ·                                     |  |
| OIL CONSERVATION COMMISSION  |                 |                                       |                             |                    | I hereby certify that the information given above is true and complete to the best of my knowledge. |  |                      |                                       |  |
| Approved by Leslie S. Clements   |                 |                                       |                             |                    | Name Name   |  |                      |                                       |  |
| Title Title  |                 |                                       |                             |                    | Position Operator   |  |                      |                                       |  |
| Date   |                 |                                       |                             |                    | Company Robert N. Enfield   |  |                      |                                       |  |