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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation		8. Farm or Lease Name B. V. Culp (NCT-B)
3. Address of Operator Box 670, Hobbs, New Mexico 88240		9. Well No. 3
4. Location of Well UNIT LETTER P 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 31 TOWNSHIP 19-S RANGE 37-E NMPM.		10. Field and Pool, or Wildcat Monument
15. Elevation (Show whether DF, RT, GR, etc.) 3570' GL		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

Acidized

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3895' TD.

Pumped 500 gallons of 15% NE acid down tubing over open hole interval 3769' to 3895'. Flushed with 10 barrels of oil. Swabbed and cleaned up and returned well to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY
C. D. BORLAND

SIGNED _____

TITLE **Area Production Manager**

DATE **July 28, 1970**

APPROVED BY **Leslie A. Clements**

TITLE **Oil & Gas Inspector**

DATE **JUL 29 1970**

CONDITIONS OF APPROVAL, IF ANY:

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PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐
Acidised

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3895' TD.

Pumped 500 gallons of 15% HCl acid down tubing over open hole interval 3769' to 3895'. Flushed with 10 barrels of water. Maximum pressure 800#. Injection rate 3 bpm. IBIP 100%, after 1 minute on vacuum. Swabbed and cleaned up and returned well to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY

SIGNED **C. D. BORLAND**

TITLE **Area Production Manager**

DATE **March 7, 1968**

APPROVED BY 

TITLE **PRODUCER**

DATE

CONDITIONS OF APPROVAL, IF ANY: