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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 G. C. Matthews
3. Address of Operator Box 670, Hobbs, New Mexico 88240	9. Well No. 10
4. Location of Well UNIT LETTER J 1650 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE, SECTION 6 TOWNSHIP 20-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Monument Paddock
15. Elevation (Show whether DF, RT, GR, etc.) 3553' GL	12. County Lea

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

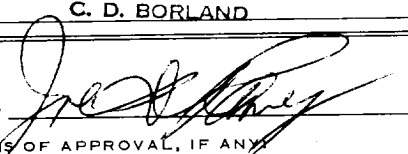
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

5240' TD.

Pumped 1500 gallons of 23% NE acid over open hole interval 5149' to 5240'. Flushed with 30 barrels of water. Maximum pressure 1600#, ISIP 800#, after 2 minutes, on vacuum. 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 February 5, 1969
APPROVED BY 	TITLE	DATE FEB 7 1969
CONDITIONS OF APPROVAL, IF ANY		