NO. OF COPIES RECEIVED	· ·		•	Form C-163
DISTRIBUTION				Superseder Old C-102 and C-103
SANTA FE	NEW MEXICO	OIL CONSERVATION COMM	ISSION	Effective 1-1-65
FILE				
u.s.g.s.		i .	5a.	Indicate Type of Lease
LAND OFFICE				State Fee.
OPERATOR			5.	State Otl & Gas Lease No.
SUN (DO NOT USE THIS FORM FOR				
(DO NOT USE THIS FORM FOR USE "APPLI				
1.			7.	Unit Agreement Name
OIL GAS WELL WELL	OTHER+			
2. Name of Operator	€.	Francis Lease Name		
Gulf Oil Corporation		erry Leonard (NCT-F)		
3. Address of Operator			9.	Well No.
Box 670, Hobbs, New	Mexico 882h0			. Mield and Pool, or Wildcat
4. Location of Well		_		
UNIT LETTER	860 FEET FROM THE _	South LINE AND 19	FEET FROM	Drinkard
	•	67 6	27 77	
THE BAST LINE, SE	ECTION TOWNSHI	RANGE	31-# NMPM.	
				. County
	15. Elevation (Sh	ow whether DF, RT, GR, etc.)	İ	
		3487' OL		68 (777777777777777777777777777777777777
Chee	ck Appropriate Box To I	ndicate Nature of Notice		
NOTICE O	F INTENTION TO:		SUBSEQUENT R	EPORT OF:
PERFORM REMEDIAL WORK	PLUG AND A	ANDON REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLI	NG OPNS.	PEUG AND ABANDOL MEN
PULL OR ALTER CASING	CHANGE PLA			
		OTHER		
OTHER				
	(Classly state all )	ertinent details, and give pertin	nent dates, including est	imated date of tarring an propised
work) SEE RULE 1103.	ed Operations (Creatly state att )	creation works of and great great	,	
perforations 65981 -	rice of Intent". det	th 40 barrels of oi ad June 28. 1967. a	l. Returned Westerned this	treatment. The
work was done on Dec Report <sup>n</sup> was not subm	itted).	evar, unrough an ev	erargue, rorm	0-1099 Dabsequent
18. I hereby certify that the inform		to the hest of my knowledge as	nd belief.	
		to the best in my same a		
ORIGINAL SIGN		g _ w	an Manager	are Marrows and 17 1060
SIGNED		TITLE Area Freducti	on Manager	DATE November 11, 1969
	Vi /			the second second second
1/200	1/1/2			**
APPROVED BY	HATTING -	TITLE		DATE
CONDITIONS OF APPROVAL, IF	ANY:			

NO. OF COPIES RECEIV	VED	a de la companya de l	Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE		NEW MEXICO OIL CONSERVATION & MISSION D. C. C.	Effective 1-1-65
FILE			
U.S.G.S.		Jun 29 3 43 PM 767	5a, Indicate Type of Lease
LAND OFFICE		- 10 M 64 LM 64	State Tree
OPERATOR			5. State Oil & Gas Lease No.
		<u> </u>	
(DO NOT USE T	SUND HIS FORM FOR PE	RY NOTICES AND REPORTS ON WELLS ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. RICH PROPOSALS.)	7. Unit Agreement Name
WELL TH	WELL	OTHER-	
2. Name of Operator  Chilf Oil Carp  3. Address of Operator	oration		8. Form or Lease Name  Harry Leonard (NCT-F)  9. Well No.
_			),
Box 670, Hobb 4. Location of Well	B. Nen Wa	<b>XX.60</b>	10. Field and Pool, or Wildcat
•	_	0/0 945 1080	Drinkard
UNIT LETTER		860 FEET FROM THE South LINE AND 1980 FEET FROM	
THE ROSE	LINE, SECT	TION 2 TOWNSHIP 21-8 RANGE 37-E NMPM.	
mmmn	mm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
		34.87	Lea
16.			
		Appropriate Box To Indicate Nature of Notice, Report or Oth	
Γ	NOTICE OF	INTENTION TO: SUBSEQUENT	REPORT OF:
			A
PERFORM REMEDIAL WO	$\overline{}$	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	닐	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING			
		CHANGE PLANS CASING TEST AND CEMENT JQB	[-1
	ا ـــا معادمه	OTHER	
OTHER	cidise		
	or Completed (		estimated date of starting any proposed
17. Describe Proposed work) SEE RULE	or Completed (	OTHER	
17. Describe Proposed work) SEE RULE  6886 PB. Plans ha of 15% NE act	or Completed (163.	Operations (Clearly state all pertinent details, and give pertinent dates, including made to treat 5-1/2" casing perforations 6698! to	
17. Describe Proposed work) SEE RULE  6886 PB. Plans ha of 15% NE act  18. I hereby certify the ORIGIN. C. D.	or Completed (1703.	Operations (Clearly state all pertinent details, and give pertinent dates, including made to treat 5-1/2" casing perforations 6698' to	6772' with 500 gallons
17. Describe Proposed work) SEE RULE  6886 PB. Plans ha of 15% NE act	or Completed (163, 163, 164).	Operations (Clearly state all pertinent details, and give pertinent dates, including made to treat 5-1/2" casing perforations 6698° to	
17. Describe Proposed work) SEE RULE  6886 PB. Plans ha of 15% NE act  18. I hereby certify the ORIGIN. C. D.	or Completed (163, 163, 164).	Operations (Clearly state all pertinent details, and give pertinent dates, including made to treat 5-1/2" casing perforations 6698' to	6772' with 500 gallons
17. Describe Proposed work) SEE RULE  6886 PB.  Plans ha of 15% NE act  ORIGIN. C. D.  SIGNED	or Completed (163, 163, 164).	Operations (Clearly state all pertinent details, and give pertinent dates, including made to treat 5-1/2" casing perforations 6698! to on above is true and complete to the best of my knowledge and belief.  Area Production Manager	6772' with 500 gallons
17. Describe Proposed work) SEE RULE  6886 PB. Plans ha of 15% NE act  18. I hereby certify the ORIGIN. C. D.	or Completed (163, 163, 164).	Operations (Clearly state all pertinent details, and give pertinent dates, including made to treat 5-1/2" casing perforations 6698' to	6772' with 500 gallons

## NEW MEXICO OIL CONSERVATION COM SION FORM C-110 (Rev. 7-60) SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND AUTHORIZATION U.S.G.5 LAND OFFICE TO TRANSPORT OIL AND NATURAL GAS TRANSPORTER FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE OPERATOR Well No. Company or Operator Harry Leonard **Gulf Oil Corporation** Range Township Section Unit Letter ¥ 21-8 37-1 Kind of Lease (State, Fed, Fee) Pool State Drinkard Township Unit Letter Section If well produces oil or condensate give location of tanks Address (give address to which approved copy of this form is to be sent) Authorized transporter of oil 🔣 or condensate 🗌 Box 1598, Hobbs, New Mexico Shall Pipeline Corporation Yes\_ Is Gas Actually Connected? Address (give address to which approved copy of this form is to be sent) Date Con-Authorized transporter of casing head gas 🎩 or dry gas 🗍 nected Box 1197. Eunice. New Mexico Warren Petroleum Corporation If gas is not being sold, give reasons and also explain its present disposition: REASON(S) FOR FILING (please check proper box) Change in Ownership . . . . . . . . . . . Other (explain below) Change in Transporter (check one) Casing head gas . Condensate.. Change in pool designation Remarks The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the 28th day of September Ву OIL CONSERVATION COMMISSION Approved by Title Area Production Manager Title Gulf Oil Corporation Address Date

Box 2167, Hobbs, New Mexico

					——————————————————————————————————————	
NUMBER OF COPIES RECEIVED		NEW MENICO OIL	CONSERVAT	TION COM SION	5004.0.110	
DISTRIBUTION SANTA FE	` ·	NEW WEYICO OH	CONSERVA	TON COM. JOIUN	FORM C-110	
FILE		SAN	TA FE, NEW A	MEXICO	(Rev. 7-60)	
U.S.G.S.			,		,	
LAND OFFICE OIL	CERTIFI	CATE OF CO	MPLIANCE	AND AUTHORIZA	TION	
TRANSPORTER GAS	T	O TRANSPOR	TOIL AND	NATURAL GAS		
PROPATION OFFICE	' <b>'</b>				<u>l</u> _	
OPERATOR	FILE THE	ORIGINAL AND 4 C	OPIES WITH TI	HE APPROPRIATE OFFIC	CE	
Company or Operator	<u> </u>			Lease	Well No.	
		BOLAUS :	C HT C	13.5		
Gulf Oil Corpore	etion	····		Harry Leonard F	·	
Unit Letter Se	ection Township	Range		County		
W	2 21-8	3	7-E	Los		
Pool			*	Kind of Lease (State, Fed.	Fee)	
Drinkard			1	State	•	
	-11 as sander	Unit Letter	Section	Township	Range	
If well produces of give location	oil or condensate on of tanks	_				
gr re rotati	y <b></b>	1 0	1 4 4 4 <	ddress to which approved cop	w of this for is to be sent?	
Authorized transporter of oil	T or condensate		Address (give a	uaress w wnich approved cop	y o, uits join is to de sent)	
_						
Shell Pipeline (	Corporation		Bex 1508.	Hobbs, New Mexic	.0	
		ctually Connecte	d? Yes T	_ No		
			<del></del>		e of this form is to be	
Authorized transporter of cas	sing head gas 🍱 or dry gas	Date Con-	Address (give a	ddress to which approved cop	y of this form is to be sent;	
		nected	1			
Warren Petroleum	a Corporation	8-11-62	Bex 1197.	Bunice, New Mexi	00	
If gas is not being sold, give		s present disposition:				
	<u>-</u>					
			1			
	REAS	ON(S) FOR FILING	(please check	proper box)		
		•				
Ne	w Well		Change in Own	ership		
Chi	ange in Transporter (check o	ne)	Other (explain below)			
	Oil Dry					
		44.3				
l	Casing head gas . To	udensaté				
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Remarks						
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mb and and and and	that the Dulan and Danil	ations of the Oil C	onservation Com	mission have been compli	ed with.	
ine undersigned certifies	mat me nues and negui	o or the orr o	:			
l	• <b>3</b> 041	/ Annual	<u>.</u>	. 19 🚱 .		
[	Executed this the 30th	day of _Augus		, 17_ <b>-05</b> ,		
1 200	SERVATION COMMISSIO	IN .	By			
<u></u>	TJERTATION COMMISSIO					
Approved by			1	12 11. 69 1 1		
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	1 -		Ames Back	notion Manager		
			Company	THE PLANT COLUMN THE PARTY OF T		
Tritte '			- Company			
/			:			
			Gulle 011	Corporation		
Date			Address			
1			B 64/F	tratin se se s		
1			1 BOX 2167	Hobbs New Mercle	<b></b>	