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**NEW MEXICO OIL CONSERVATION COMMISSION**

APR 14 3 33 PM '67

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>E-580</b>	
7. Unit Agreement Name	
8. Farm or Lease Name <b>Lea FE State</b>	
9. Well No. <b>2</b>	
10. Field and Pool, or Wildcat <b>Vacuum</b>	
12. County <b>Lea</b>	

**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"/>	2. Name of Operator <b>Gulf Oil Corporation</b>
3. Address of Operator <b>Box 670, Hobbs, New Mexico</b>	4. Location of Well UNIT LETTER <b>C</b> , <b>330</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>11</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <b>4040' GL</b>	16. 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 JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

**CI Report**

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.

**Well uneconomical to produce at this time. To be carried as closed in.**

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 **April 13, 1967**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: