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

NEW MEXICO OIL CONSERVATION COMMISSION

FEB 15 3 27 PM '66

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
A-1613-1

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 Graham State (NCT-H)
3. Address of Operator Box 670, Hobbs, New Mexico	9. Well No. 2
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 13 TOWNSHIP 20-S RANGE 36-E N.M.P.M.	10. Field and Pool, or Wildcat Momment
15. Elevation (Show whether DF, RT, GR, etc.) 3551 DF	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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	Plugged and abandoned.

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.

3812' PB.

Ran 5-1/2" CI BP on tubing and set at **3695'**. Circulated hole with mud. Spotted 10 sack cement plug on top of BP. Tested casing and plug with 500#, OK. Spotted 10 sack cement plug from 55' to surface. Cleaned location and installed dry hole marker. Plugged and abandoned February 14, 1966.

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

SIGNED _____ TITLE **Area Production Manager** DATE **February 14, 1966**

APPROVED BY *Fessie A. Clements* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: