

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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  Fee

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 <b>Gulf Oil Corporation</b>	8. Farm or Lease Name <b>B. V. Culp (NCT-A)</b>
3. Address of Operator <b>Box 670, Hobbs, New Mexico 88240</b>	9. Well No. <b>6</b>
4. Location of Well UNIT LETTER <b>XXY B</b> . <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1930</b> FEET FROM THE <b>East</b> LINE, SECTION <b>19</b> TOWNSHIP <b>19-S</b> RANGE <b>37-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Monument</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3694' GL</b>	12. County <b>Lea</b>

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 JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

**Filled cellar**

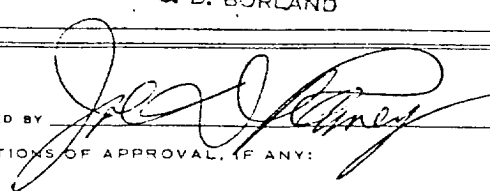
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

**Installed valves above ground level off each casing string. Filled cellar.**

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 **August 27, 1971**

APPROVED BY  TITLE **SUPERVISOR DISTRICT I** DATE **AUG 30 1971**

CONDITIONS OF APPROVAL, IF ANY: