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NEW MEXICO OIL CONSERVATION COMMISSION

2 - MDCO
1 - File

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

AUG 9

5a. Indicate Type of Lease State <u>44257</u> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <u>B-244-1</u>
7. Unit Agreement Name
8. Farm or Lease Name <u>East Eumont Unit</u>
9. Well No. <u>105</u>
10. Field and Pool, or Wildcat <u>Eumont</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3575 OL</u>
12. County <u>Lea</u>

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Elidicator Oil Company

3. Address of Operator
Box 249, Hobbs, New Mexico

4. Location of Well
UNIT LETTER C, 330 FEET FROM THE North LINE AND 2304 FEET FROM
THE West LINE, SECTION 2 TOWNSHIP 20S RANGE 37E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3575 OL

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 <u>Convert to Injection well</u> <input checked="" type="checkbox"/>

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.

Pulled rods and tubing. Ran bit and scraper to 3612'. Set 2-3/8" internally plastic coated tubing at 3628', and Johnson type 101-8 packer at 3594'.

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

SIGNED C. A. Wade TITLE Area Supt. DATE 7-6-67

APPROVED BY _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

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Form C-103
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5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	B-244-1

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 ☐ GAS WELL ☐ OTHER-

2. Name of Operator
Gulf Oil Corporation

3. Address of Operator
Box 670, Hobbs, New Mexico

4. Location of Well
UNIT LETTER **C** **330** FEET FROM THE **North** LINE AND **2304** FEET FROM
THE **West** LINE, SECTION **2** TOWNSHIP **20-S** RANGE **37-E** N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
3575 GL

7. Unit Agreement Name	
8. Farm or Lease Name	H. T. Orcutt (NCT-E)
9. Well No.	2
10. Field and Pool, or Wildcat	Bumont
12. County	Lea

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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <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.

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
L. A. TURNER

SIGNED _____ TITLE **Area Petroleum Engineer** DATE **May 4, 1965**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: