DISTRIBUTION		4				Form C-103 Supersedes Old		
						C-102 and C-103		
SANTA FE		NE	WEXICO OIL CON	EN ATTOM COMMISSIO	I S	Effective 1-1-65		
FILE	1-+				r			
U.S.G.S.				May 1 0 1979		5a. Indicate Type of Lease	\neg	
LAND OFFICE				15,83 I. II. 107 D			•• 📗	
OPERATOR						5. স্কুল ত্য়াপ্ত dis Lease No. Federal		
				<u> </u>				
	SUNDF	RY NOTICES	AND REPORTS ON	WELLS A DEFENENT RESER (PROPOSALS.)			/////	
(DO NOT USE THIS FO	RM FOR PRO	OPOSALS TO DRILL FIGH FOR PERMIT -	OR TO DEEPEN OR PLUG BA	CK TO A DIFFERENT RESER PROPOSALS.)	VOIR.		777777	
1.						7. Unit Agreement Name		
OIL GAS WELL	, []	OTHER-						
Name of Operator						8. Farm or Lease Name	. 1	
GULF OIL CORPOR	RATION	V				Scuare Lake		
. Address of Operator						9. Well No.		
P. O. Box 670, Hobbs, NM 88240						<u> </u>		
: Location of Well						10. Field and Pool, or Wildcat		
C		660	south South	1.930	FEET FROM	Square Lake (G—SA)		
UNIT LETTER			PROM THE				//////	
THE 1885 LINE, SECTION 12 TOWNSHIP 17 RANGE 29 NMPM							//////	
THE	LINE, SECTI	ION	TOWNSHIPT	AANGE	Estatua (Control of the Control of t		777777	
	77777	15. E	Llevation (Show whether	DF, RT, GR, etc.)		12. County	HIII.	
	111111		3654.	${ m GL}$		Eddy		
<u> </u>	777777	A	Pay To Indicate N	ature of Notice, Ro	enore or Oth	er Data		
						REPORT OF:		
NOTI	CE OF I	NTENTION T	O:		B3EQUEIVI	KEI OKI OI.		
<u></u>	-				[7]	ALTERING CASING		
PERFORM REMEDIAL WORK	亅		PLUG AND AMANDON	REMEDIAL WORK	<u> </u>		片	
TEMPORARILY ABANDON	_			COMMENCE DRILLING OPN		PLUG AND ABANDON	MENT [
PULL OR ALTER CASING			CHANGE PLANS	CASING TEST AND CEMEN	rues [] 'neina les	ole cumeate	ত্য	
			<u></u>	OTHER	GOTHE TOC	ur sarvey		
OTHER				-	•			
17 Describe Eroposed of Co	ompleted C	Dergtions (Clear	ly state all pertinent det	ails, and give pertinent d	ates, including	estimated date of starting any	proposed	
work) SEE RULE 1103.		•						
				•				
Results of	casing	leak surv	ey of May 10, 1	.979 :				
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Information	submi		and complete to the best	of my knowledge and bel	nef.			
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Information	submi		and complete to the best	of my knowledge and bel	nef.			
Information	submi		and complete to the best	of my knowledge and bel	ncineer		70	

CONDITIONS OF APPROVAL, IF ANY: