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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
APR 04 1984  
O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 12-1-78

50. 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 OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                    |                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                  | 7. Unit Agreement Name                   |
| 2. Name of Operator<br>Gulf Oil Corp.                                                                                                                                                              | 8. Farm or Lease Name<br>Edely "FV" Home |
| 3. Address of Operator<br>P. O. Box 670, Hobbs, NM 88240                                                                                                                                           | 9. Well No.<br>3                         |
| 4. Location of Well<br>UNIT LETTER <u>P</u> <u>66C</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM THE <u>East</u> LINE, SECTION <u>25</u> TOWNSHIP <u>20S</u> RANGE <u>27E</u> NMPM. | 10. Field and Pool, or Wildcat           |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><u>2262' BL 3302.5</u>                                                                                                                            | 12. County<br>Hidalgo                    |

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 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.

Red Rio Corp. completed 17 1/2" hole @ 3:15 P.M., 3-15-84. TD 500' @ 6:20 P.M., 3-16-84. PL + ran 11 1/2" + 10' to 13 3/8" H.P. # H-410 ST+C, set @ 500'. Cost 4300 @ 46" C. Plug dn @ 10:45 A.M., 3-17-84. Did not wire core. Long core top of cement @ 66' Cost + ran 1" pipe 1.25 @ 46" C. Plug 10.24. Set 500#-10.

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

SIGNED Leslie A. Clements TITLE AREA NILE SUIT DATE 4-2-84  
Original Signed By  
Leslie A. Clements  
Supervisor District II  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE APR 09 1984  
CONDITIONS OF APPROVAL, IF ANY: