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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 Gulf Oil Corporation	8. Farm or Lease Name J. N. Carson (NCT-A)
3. Address of Operator P. O. Box 670, Hobbs, N.M. 88240	9. Well No. 8
4. Location of Well UNIT LETTER 0 766 FEET FROM THE south LINE AND 2086 FEET FROM THE east LINE, SECTION 28 TOWNSHIP 21S RANGE 37E N.M.P.M.	10. Field and Pool, or Wildcat Paddock
15. Elevation (Show whether D ₁ , RT, GR, etc.) 3451' GL	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK
TEMPORARILY ABANDON
PULL OR ALTER CASING
OTHER

PLUG AND ABANDON
CHANGE PLANS

REMEDIAL WORK
COMMENCE DRILLING OPERATIONS
CASING TEST AND CEMENT JOB
OTHER **Acidized**

ALTERING CASING
PLUG AND ABANDONMENT

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.
5344' PB.

Treated 7" casing perforations 5114' to 5204' down tubing with 2,000 gallons of 28% NE acid as follows: First, second and third stages with 500 gallons of acid and 500 gallons of brine water with each stage separated with 14, 7/8" RCNB sealers. Fourth stage with 500 gallons of acid and 1424 gallons of brine water flush and overflush. ISIP 1000#; after 2 minutes on vacuum. Average injection rate 4.3 bpm. Maximum pressure 3000#; minimum pressure 2600#. Swabbed and cleaned up and placed well on production.

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1970 APR 16

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

SIGNED _____
APPROVED BY *[Signature]*
CONDITIONS OF APPROVAL, IF ANY:

TITLE **Area Production Manager**
TITLE **SUPERVISOR DISTRICT**

DATE **April 16, 1970**

DATE **APR 17 1970**

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APR 16 1970

**OIL CONSERVATION COMM.
HOBBS, N. M.**