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NEW MEXICO OIL CONSERVATION COMMISSION  
MAY 11 3 29 PM '67

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

**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"/>	5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator <b>Gulf Oil Corporation</b>	5. State Oil & Gas Lease No.
3. Address of Operator <b>Box 670, Hobbs, New Mexico</b>	7. Unit Agreement Name
4. Location of Well UNIT LETTER <b>E</b> <b>1980</b> FEET FROM THE <b>North</b> LINE AND <b>660 330</b> FEET FROM THE <b>West</b> LINE, SECTION <b>7</b> TOWNSHIP <b>22-S</b> RANGE <b>37-E</b> NMPM.	8. Farm or Lease Name <b>H. T. Mattern (NCT-D)</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3455' GL</b>	9. Well No. <b>2</b>
12. County <b>Lea</b>	10. Field and Pool, or Wildcat <b>Arrowhead</b>

**Check Appropriate Box To Indicate Nature of Notice, Report or Other Data**

NOTICE OF INTENTION TO:

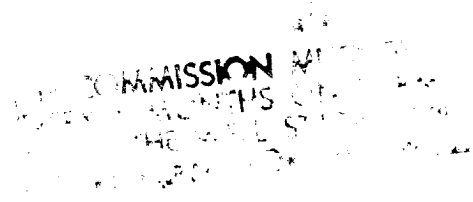
SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> OTHER _____ <input type="checkbox"/>
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**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 1104.

**Closed well in. Uneconomical to produce at this time.**



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

ORIGINAL SIGNED BY SIGNED <u>C. D. BORLAND</u>	TITLE <u>Area Production Manager</u>	DATE <u>May 9, 1967</u>
APPROVED BY _____	TITLE _____	DATE _____

CONDITIONS OF APPROVAL, IF ANY: