

NEW MEXICO OIL CONSERVATION COMMISSION

Form No. 1  
 November 1961  
 O-102 and O-103  
 (Revisions 10-65)

NO. OF COPIES REQUIRED
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
OPERATOR

Well No. (See Note)
State (See Note)
County (See Note)
Section (See Note)
Township (See Note)
Range (See Note)
Block (See Note)
Subsection (See Note)
Other (See Note)
Well No. <b>B-228</b>

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"/>	2. Well Agreement Name
3. Name of Operator <b>Gulf Oil Corporation</b>	4. Section Number <b>4</b>
5. Address of Operator <b>P. O. Box 930, Kermit, Texas</b>	6. Well No. <b>4</b>
7. Location of Well 0 660 FEET FROM THE <b>South</b> LINE AND 123 FEET FROM <b>East</b> LINE, SECTION <b>36</b> TOWNSHIP <b>25-S</b> RANGE <b>37-S</b> N.M.P.M.	8. Name of Landowner <b>Langlie Mattix</b>
9. Elevation (Show whether DF, RT, GR, etc.) <b>3026' GR</b>	10. County <b>Lea</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"/>	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"/>
DRILL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> <b>Shut Well In</b>

11. Describe in brief the proposed operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEE RULE 1103.

Well shut-in - To be held for inclusion in possible waterflood.

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

SIGNED M. H. White TITLE Area Engineer DATE September 29, 1965

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: