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APR 8 AM 8 19

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 <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| OG-3931                                   |                              |

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<br>Gulf Oil Corporation                                                                                                                                                              |  | 8. Farm or Lease Name<br>Lea KN State        |
| 3. Address of Operator<br>Box 670, Hobbs, New Mexico 88240                                                                                                                                               |  | 9. Well No.<br>2                             |
| 4. Location of Well<br>UNIT LETTER <u>B</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>17</u> TOWNSHIP <u>17-S</u> RANGE <u>37-E</u> NMPM. |  | 10. Field and Pool, or Wildcat<br>Midway Abo |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3783' GL                                                                                                                                                |  | 12. County<br>Lea                            |

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 type="checkbox"/> |                                               |
| OTHER <input type="checkbox"/>                 |                                           | Acidized                                             |                                               |

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.

8990' PB.

Treated 5 $\frac{1}{2}$ " casing perforations 8797' to 8982' down tubing with 3000 gallons of 28% single inhibited acid and 1500 gallons of 3% single inhibited acid. Flushed with 50 barrels of oil. Maximum pressure 4000#, minimum 2300#. ISIP Off, after 5 minutes on vac. Let acid set 2 hours. Swabbed and cleaned up. Ran rods and pump and returned well to production.

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

SIGNED

TITLE Area Production Manager

DATE April 2, 1968

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: