40. OF COPIES RECEIVED				Form C-103		
DISTRIBUTION			7 Acres	Supersedes Old C-102 and C-103		
SANTAFE	NEW MEXICO OIL	CONSERVATION COMMISSION		Effective 1-1-65		
FILE			г	For Indiana Toma of	I amaa	
U.S.G.S.	3-NMOCC			5a. Indicate Type of		
LAND OFFICE	1-File		ļ.	State X  5. State Oil & Gas L	Fee.	
OPERATOR	1-116			E-7183	Jedse No.	
	LINDRY MOTICES AND DEPORT	C ON WELL C		anninni.	ummi	
DO NOT USE THIS FORM USE **A	UNDRY NOTICES AND REPORT FOR PROPOSALS TO DRILL OR TO DEEPEN OR PPLICATION FOR PERMIT -" (FORM C-101) F	O ON WELLO PLUG BACK TO A DIFFERENT RESERVO OR SUCH PROPOSALS.)	IR.			
1.				7. Unit Agreement N	lame	
OIL X GAS WELL WELL	OTHER-			<u>-</u>		
2. Name of Operator GETTY OIL COMPANY				8. Farm or Lease Name		
3. Address of Operator				EAST EUMONT	UNIT	
P.O. BOX 249, HOBBS	NEW MEXICO 88240			1		
4. Location of Well				10. Field and Pool, or Wildcat		
F 2310 NORTH 2310				EUMONT OUEFN		
UNIT LETTER	FEET FROM THE	LINE AND	_ FEET FROM	THITTINITY	mmm	
WEST	, SECTION TOWNSHIP	-S RANGE 37-E	NMPM.			
	15. Elevation (Show w	hether DF, RT, GR, etc.)		12. County		
$\frac{16}{16}$				LEA.	.11111111111111111111111111111111111111	
C	heck Appropriate Box To Indic	~				
NOTICE	OF INTENTION TO:	SUB	SEQUENT	REPORT OF:		
	PLUG AND ABANDO	N REMEDIAL WORK		ALTERING	CASING	
PERFORM REMEDIAL WORK	PLUG AND ABANDO	COMMENCE DRILLING OPNS.	H		ABANDONMENT	
TEMPORARILY ABANDON	CHANGE PLANS	CASING TEST AND CEMENT J	<del></del>	FEOG AND	ABARDORMER!	
PULL OR ALTER CASING	CHANGE PLANS	OTHER		NIO	*XX	
OTHER		_ 🗆 📗				
15 D	leted Operations (Clearly state all pertino	and sive portions date	- iludi	actimated data of etc	eting any proposed	
work) SEE RULE 1903.	leted Operations (Clearly State all pertua	mi deidiis, and give periment date	s, including t	estimated date of sta	iting any proposed	
THIS WELL WILL BE A	ETUPNED TO ACTIVE STATUS	AS THE NORTH SEGMENT	IS DEVI	ELOPED FOR WA	ATERFLOOD	
					11214 2002	
IN THE MEAN FUTURE.						
This well has	been shut-in since 1965.	•				
6	xhlves ////	175				
	Sapires 11/1	/ / /				
18. I hereby certify that the infe	ormation above is true and complete to th	e best of my knowledge and belief.	<del>,</del>			
SIGNED C. L. WADE:	<u> </u>	AREA SUPERINTENDE	NT	DATE OCTOR	BER 21, 1974	
					. 1	
	5-mg .				1/2	
					, j - 1	
APPROVED BY		E		DATE		

WLG/bh