

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

NEW MEXICO OIL CONSERVATION COMMISSION

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

AUG 29 3 57 PM '67

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator <b>Gulf Oil Corporation</b>		8. Farm or Lease Name <b>C. O. Davis</b>
3. Address of Operator <b>Box 670, Hobbs, New Mexico 88240</b>		9. Well No. <b>3</b>
4. Location of Well UNIT LETTER <b>M</b> , <b>990</b> FEET FROM THE <b>South</b> LINE AND <b>990</b> FEET FROM THE <b>West</b> <b>29</b> LINE, SECTION <b>18-S</b> TOWNSHIP <b>39-E</b> RANGE <b>39-E</b> NMPM.		10. Field and Pool, or Wildcat <b>East Hobbs San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3597' GL</b>		12. County <b>Lea</b>

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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐  
**Changed plans**

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.

4471' TD.

Form C-103, dated June 8, 1966, stated our proposed plans to acidize. This work will not be done at this time. Well is still producing.

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

ORIGINAL SIGNED BY  
**C. D. BORLAND**

SIGNED \_\_\_\_\_

TITLE **Area Production Manager**

DATE **August 29, 1967**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: