

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

LOT 3 1/2 11 1/2 11 1/2

5a. Indicate Type of Lease
State Fee

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name W. D. Grimes (NCT-A)
3. Address of Operator Box 670, Hobbs, New Mexico 88240	9. Well No. 16
4. Location of Well UNIT LETTER D 800 FEET FROM THE North LINE AND 700 FEET FROM THE West LINE, SECTION 32 TOWNSHIP 16-S RANGE 38-E NMPM.	10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 3636' GL	12. County Lea

16. 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 _____

ALTERING CASING

PLUG AND ABANDONMENT

Acidized and perforated

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.

5409' PB, 7050' TD.

Pulled rods, pump and tubing. Perforated 7" casing at 5387-89' with 4, 1/2" JHPF; 5389-91' with 2, 1/2" JHPF and 5391-95' with 4, 1/2" JHPF. Ran Baker Model R packer on 2-3/8" OD tubing and set packer at 5345'. Treated perforations with 72 barrels of 15% NE FE controlled acid. Tubing on vacuum through out treatment. Flushed with 22 barrels of water. ISIP vacuum, AIR 2 bpm. Swabbed and tested. Pulled tubing and packer. Ran tubing, 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.

ORIGINAL SIGNED BY

SIGNED C. D. BORLAND

TITLE Area Production Manager

DATE October 8, 1968

APPROVED BY [Signature]

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: