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LAND OFFICE	
OPERATOR	

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 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. 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 H. V. Black	
3. Address of Operator Box 670, Hobbs, New Mexico 88240		9. Well No. 1	
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 13 TOWNSHIP 17-S RANGE 38-E NMPM.		10. Field and Pool, or Wildcat South Knowles Devonian	
15. Elevation (Show whether DF, RT, GR, etc.) 3685' 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 ☐

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.

12,165' TD.

Pulled tubing and pump. Ran tubing. Treated open hole interval 12,110' to 12,165' with 2000 gallons of 15% NE acid. Maximum pressure 1000#, dropped to 0# when acid hit formation, then went on vacuum. Flushed with 53 barrels of oil. Swabbed and cleaned up. Pulled tubing. Ran tubing, Kobe pump and equipment. 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 **January 27, 1969**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: