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NEW MEXICO OIL CONSERVATION COMMISSION N.O.C.

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

JUL 1 1966 PM '66

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
**B-5885**

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- 2. Name of Operator <b>Gulf Oil Corporation</b> 3. Address of Operator <b>Box 670, Hobbs, New Mexico</b> 4. Location of Well UNIT LETTER <b>0</b> <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>30</b> TOWNSHIP <b>19-S</b> RANGE <b>35-E</b> NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) <b>3740' GL</b>	7. Unit Agreement Name <b>West Pearl Queen Unit</b> 8. Farm or Lease Name  9. Well No. <b>132</b> 10. Field and Pool, or Wildcat <b>Pearl Queen</b> 12. County <b>Lea</b>
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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 ☒ **Installed pumping equipment and**

**placed well on production**

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.

5062' TD.

Well has been carried as temporarily abandoned. Ran 2-3/8" tubing with perforated nipple at 4995', SN at 4994'. Set pumping unit. Ran rods and pump and placed well on 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 **July 1, 1966**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: