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NEW MEXICO OIL CONSERVATION COMMISSION OFFICE D. C. C.

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

MAY 25 3 18 PM '66

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 <b>West Pearl Queen Unit</b>
2. Name of Operator <b>Gulf Oil Corporation</b>	8. Farm or Lease Name
3. Address of Operator <b>Box 670, Hobbs, New Mexico</b>	9. Well No. <b>133</b>
4. Location of Well UNIT LETTER <b>C</b> , <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>31</b> TOWNSHIP <b>19-S</b> RANGE <b>35-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Pearl Queen</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3729' 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 ☐

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.

**Cleaned out and installed pumping equipment**

**5045' TD.**

**Cleaned out with 3-3/4" bit to 5002'. Ran 2-3/8" tubing with perforated nipple at 4931', SN at 4930'. 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  
**E. D. BORLAND**

SIGNED **E. D. BORLAND** TITLE **Area Production Manager**

DATE **May 24, 1966**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: