

CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. E-1638

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.

OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name West Pearl Queen Unit
Name of Operator GULF OIL CORPORATION	8. Farm or Lease Name
Address of Operator P. O. Box 670, Hobbs, NM 88240	9. Well No. 153
Location of Well UNIT LETTER <u>G</u> , <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>31</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> N.M.P.M.	10. Field and Pool, or Wildcat Pearl Queen
15. Elevation (Show whether DF, RT, GR, etc.) 3732' GL	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☒	CHANGE PLANS ☐
DRILL OR ALTER CASING ☐	OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	OTHER ☐

1. 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.

Kill well if necessary with 8.6# GKF. POH with rods, pump; unseat tubing anchor, POH with 2-7/8" tubing, anchor & 2-3/8" tubing. Set CIBP at 4730'; pressure test casing & CIBP to 500#. Circulate with 8.6# brine water + 0/6% Tretolite KW 37 and 10#/150 bbl Tretolite K 470. ND BOP, NU wellhead. Warehouse rods & pump.

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

CHIEF <u>R.D. Pitzer</u>	TITLE <u>Area Engineer</u>	DATE <u>7-16-80</u>
PROVED BY <u>John Runyan</u> Geologist	TITLE _____	DATE <u>JUL 17 1980</u>
CONDITIONS OF APPROVAL, IF ANY:		