OF COPIES RECEIVED		_	_	Form C-103
DISTRIBUTION				Superveder Old C+102 and C+103
SA' A FE		NEW MEXICO OIL CON	ISERVATION COMMISSION	Effective 1-1-65
FILE				
U.S.G.S.				5a. Indicate Type of Lease
LAND OFFICE				State KX Fee
OPERATOR				5, State Off & Gas Lease No. E-1638
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUS BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)				
1.				
OIL TOK GAS OTHER.				7. Unit Agreement Hame
2. Name of Operator				West Pearl Queen Unit
Gulf Oil Corpora	tion			6. 1 Will Of Ledde 14dine
3. Address of Operator	CION			9. Well No.
Box 670, Hobbs, New Mexico				
4. Location of Well				155
UNIT LETTER K 1980 FEET FROM THE SOUTH LINE AND 1980 FEET FR				10. Field and Pool, or Wildcat Pearl Queen
THE WEST LIN	E, SECTION_	31 TOWNSHIP 19-	S RANGE 35-E NM	··· (
THIMM	TIIII	15, Elevation (Show whether	er DF, RT, GR, etc.)	12. County
			3719' G1	Lea
16.	heck Ap	propriate Box To Indicate	Nature of Notice, Report or	Other Data
NOTICE	OF INT	ENTION TO:	SUBSEQUE	INT REPORT OF:
			1	
PERFORM REMEDIAL WORK		PLUS AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	PLUS AND ABANDONMENT
PULL OR ALTER CASING		CHANGE PLANS	CABING TEST AND CEMENT JOB	Total and Additionment
			OTHER	·
OTHER				
19 December December Comment			Well Status Report.	
work) SEE RULE 1103.	resea Obesas	tions (Crearty state att pertinent de	talls, and give pertinent dates, includ	ing estimated date of starting any proposed
			;	
Well lest produce	d in 10	70. Will P & A in 19	74	
ver rang broduce	~ 14 17	WILL P & A ID 19	74.	
			Expires 101	
		•		1,1 —
			/0/	1/75
			C./p/res	
			Copie	
			' y	
A. I hereby needfy that the 1-f-	emation st-	we is true and complete to the best		
A	INTERIOR SOO	ve as true and complete to the best	or my knowledge and belief.	
147	0. 5		V	
16HEO	nus	TITLE	Area Engineer	DATE October 16, 1974
		Onia C:		
		Orig. Signed by		
PPROVED 8Y		Joe D. Ramey Dist. I, Supv.		DATE
ONDITIONS OF APPROVAL,	F ANYL	Dist. 1, Supv.		