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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

3a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name C. T. Bates	
9. Well No. 1	
10. Field and Pool, or Wildcat Eunice-Monument	
12. County	

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Gulf Oil Corporation

3. Address of Operator
P. O. Box 670, Hobbs, N.M. 88240

4. Location of Well
UNIT LETTER P, 660 FEET FROM THE south LINE AND 660 FEET FROM THE east LINE, SECTION 26 TOWNSHIP 19S RANGE 36E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Well Status Report</u> <input checked="" type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Closed in July 1, 1971. Plug and abandon early 1975.

Expires 10/1/75

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

SIGNED <u>B. J. Barkley</u>	TITLE <u>Area Engineer</u>	DATE <u>10-15-74</u>
PROVED BY <u>Joe D. Ramey</u>	TITLE <u>Dist. I, Supv.</u>	DATE <u>10-15-74</u>
CONDITIONS OF APPROVAL, IF ANY:		