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NEW MEXICO OIL CONSERVATION COMMISSION

MAY 10 3 30 PM '68

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	


SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Northwest Eumont Unit
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name
3. Address of Operator Box 670, Hobbs, New Mexico 88240	9. Well No. 149
4. Location of Well UNIT LETTER A , 990 FEET FROM THE North LINE AND 330 FEET FROM THE East LINE, SECTION 33 TOWNSHIP 19-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat Eumont
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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"/> REMEDIAL WORK <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> OTHER <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/>	SUBSEQUENT REPORT OF: ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CI Report

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.

Closed well in, uneconomical to produce at this time.

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 May 10, 1968
APPROVED BY 	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		