NO. OF COPIES RECEIVED		.Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERBAION ECHEMICS FOR	Effective 1-1-65
FILE	1 20 0 0	
U.S.G.S.	Jun 29 3 42 PM '67	5a. Indicate Type of Lease
LAND OFFICE	,	State Fee.
OPERATOR		5. State Oil & Gas Lease No.
SUNDR	Y NOTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ON FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
USE MAPPLICATE	ON FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
		7. Unit Agreement Name
WELL GAS WELL  2. Name of Operator	OTHER-	
		8. Farm or Lease Name
Gulf Oil Corporation  3. Address of Operator		J. W. Smith
_		9. Well No.
Box 670, Hobbs, New Max 4. Location of Well	100	1
		10. Field and Pool, or Wildcat
UNIT LETTER H , 19	80 FEET FROM THE North LINE AND 660 FEET FRO	Monumen \$
THE LINE, SECTIO	N 34 TOWNSHIP 19-8 RANGE 36-B NMPI	
mmmmm		
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3642° GL	Lea
Check A	appropriate Box To Indicate Nature of Notice, Report or O	ther Data
NOTICE OF IN	TENTION TO	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
OTHER	OTHER	
	CI Report	
17, Describe Proposed or Completed Ope	erations (Clearly state all pertinent details, and give pertinent dates, includin	ag estimated date of starting any proposed
work) SEE RULE 1 103.		, something any property
Well still carried as o'	losed in. No plans have been made at this time	a fore fromthom receive an
this well.	and and harries make pager range as strate ATM	2 TOY THE MINE MOLK OH
	NOISSIP	
	A CANADA	
	NOISSIV	
±**±.	in the second se	
OCCUPATION OF THE PARTY OF THE	ma.	
ORIGINAL SICHED C. D. 70# 40	er	
18. I hereby certify that the information a	bove is true and complete to the best of my knowledge and belief.	
ORIGINAL SIGNED	Rev	
C. D. ROBIGAND		• • • • • • • • • • • • • • • • • • • •
SIGNED	TITLE Area Production Manager	DATE June 28, 1967
	STATE TO STATE OF THE STATE OF	
`	The state of the s	
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		