.O. OF COPIES RECEIVED			-	Form C=103 Supersedes Old	1	
DISTRIBUTION				C-102 and C-103		
SANTAFE	NEW MEX	ICO OIL CONSI	ERVATION COMMISSION	Effective 1-1-65		
FILE						
U.S.G.S.				5a. Indicate Type of Lea		
LAND OFFICE				State	Fee VII	
OPERATOR				5, State Oil & Gas Lease	No.	
SUN (DO NOT USE THIS FORM FOR USE "*APPLI	DRY NOTICES AND REPROPOSALS TO DRILL OF TO DECATION FOR PERMIT -" (FOR	EPORTS ON	WELLS LCK TO A DIFFERENT RESERVOIR. I PROPOSALS.)			
•				7. Unit Agreement Name		
OIL GAS WELL WELL	OTHER-					
Name of Operator				8. Farm or Lease Name		
Gulf 0il Corporation				Bertie Whitmin	re	
. Address of Operator				9. Well No.		
Box 670, Hobbs, New	Mexico 88240			1		
Location of Well	HEATCO GOZAO			10. Field and Pool, or W	ildcat	
	1090	North	1980	Eunice-Monumen	nt	
UNIT LETTER G	1900 FEET FROM T	HE MOLEN	LINE AND 1900 FEET	THITTINI MON	IIIIIII	
THE East LINE, SE	CT10N 8 TOV	VNSHIP 20-S	RANGE 37-E	MPM.		
mmmm	TTTTTTT	m (Show whather	DF, RT, GR, etc.)	12. County	4444	
	11111111 12. Fleadild			Lea		
			57' GL		,,,,,,,,	
Chec	ck Appropriate Box 7	To Indicate N	ature of Notice, Report or			
NOTICE OF	FINTENTION TO:		SUBSEQU	ENT REPORT OF:		
			•		<b>6</b>	
PENFORM REMEDIAL WORK	PLUG A	ND ABANDON	REMEDIAL WORK	ALTERING CAS	ING	
i i i i i i i i i i i i i i i i i i i			COMMENCE DRILLING OPHS.	PLUG AND ABA	NDONMENT [	
TEMPORARILY ABANDON	FHANG	E PLANS	CASING TEST AND CEMENT JOB			
PULL OR ALTER CASING			THER			
OTHER			Plugged back			
17. Describe Proposed or Complete	d Operations (Clearly state	all pertinent det	ails, and give pertinent dates, incl	uding estimated date of starting	any propose	
work) SEE RULE 1103.	, ,					
overt pp	•					
3485' PB.	11	OT DD a *	2/951 chandening per	forations 3512-356	81.	
Pulled tubing	and packer. Set	CI BP a t	3485', abandoning per	nreedon Returne	d .	
Ran 2-3/8" tubing an	id packer. Set p	acker at 3	423' with 12,000# con	pression. Recuire	u	
well to production.	• •		•			
	•					
	•	•			•	
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			•			
	•					
					ā	
					-	
		-1040 45 45 5 5-4	of my knowledge and belief.			
18. I hereby certify that the inform	ation above is true and con	ibtere to the past	or my minourage and person			
$\sim$	,		<b>.</b> .	A	5 1074	
NIGHER /21/ar	beah	TITLE	rea Engineer	DATE August	LJ, 19/4	
	- diring					
•	************************************	D.S.		a de la companya de	معجد جرقها يران	
	A SEE LEVEL OF THE SEE SEE			DATE	11 11 11	

CONDITIONS OF APPROVAL, IF ANYI

Form C-103