

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 12-1-78

5a. Indicate Type of Lease
State ☒ For ☐

5. State Oil & Gas Lease No.
A-1543-1

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator <u>Gulf Oil Corp.</u>	8. Farm or Lease Name <u>Graham State (WCT-F)</u>
3. Address of Operator <u>P. O. Box 670, Hobbs, NM 88240</u>	9. Well No. <u>5</u>
4. Location of Well UNIT LETTER <u>P</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>36</u> TOWNSHIP <u>19S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat <u>Grance Monument</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3586' GL</u>	12. County <u>Lea</u>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER Re-enter TA well, recomplete ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Perf 3721-24', 3782-85', 3807-10', 3882-85' 1 1/2" JHPF 180°. Spot 250 gals
15% NEFE HCL. 15IP. nac. Lub. Jet CIBP @ 3775' GIN 4 BP, MA,
perf sub, SN on 2 3/8" tlg. GIN 4 pmp + rods. Jet ^{tot.} ppg unit.
ppg to btry 2700, 540 BW.

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

SIGNED RDPite

TITLE AREA ENGINEER

DATE 2-21-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE FEB 23 1984

CONDITIONS OF APPROVAL, IF ANY: