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NEW MEXICO OIL CONSERVATION COMMISSION

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.
7. Unit Agreement Name
8. Farm or Lease Name <u>Theodore Anderson</u>
9. Well No. <u>8</u>
10. Field and Pool, or Wildcat <u>Eunice-Monument</u>
12. County <u>Lea</u>

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>
2. Name of Operator <u>Gulf Oil Corporation</u>
3. Address of Operator <u>Box 670, Hobbs, New Mexico 88240</u>
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>17</u> TOWNSHIP <u>20-S</u> RANGE <u>37-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <u>3543' GL</u>

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

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER Plug back and perforate higher in Eunice-Monument zone.

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.

3734' PB.

Pull producing equipment. Set CI BP at 3670' and cap with 10' cement, abandoning old Eunice-Monument perforations 3696' to 3732'. Test BP and casing with 500#. Perforate 5-1/2" casing in the Eunice-Monument zone at approximately 3498' to 3625'. Run treating equipment. Treat new perforations with 1500 gallons of 15% NE acid and frac treat with 26,000 gallons of gel water. Flush with 1000 gallons of gel water. Pull treating equipment. Run tubing. Swab and clean up and return well to production.

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

SIGNED [Signature] TITLE Area Engineer DATE May 2, 1974

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: