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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.

## 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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Water Injection Well</u>	7. Unit Agreement Name <u>Central Drinkard Unit</u>
2. Name of Operator <u>Gulf Oil Corporation</u>	8. Farm or Lease Name
3. Address of Operator <u>Box 670, Hobbs, N.M. 88240</u>	9. Well No. <u>111</u>
4. Location of Well UNIT LETTER <u>G</u> . <u>1874</u> FEET FROM THE <u>north</u> LINE AND <u>1974</u> FEET FROM THE <u>east</u> LINE, SECTION <u>28</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat <u>Drinkard</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3446' GL</u>	12. County <u>Lea</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 JOBS ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

OTHER Install liner, perforate & acidize ☐

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.

6620' TD. Pull injection equipment. Clean out to 6620'. Run approximately 180' to 230' 4 1/2" OD 11.60# 8 RT API casing liner and set on bottom. Cement with 30 sacks Class H cement and WOC 24 hours. Test liner to 3000#. If possible, pump into top of liner and squeeze top of liner with cement as needed. Perforate lower Drinkard zone from approximately 6550' to 6610'. Acidize each set of perforations. Swab and clean up. Run injection tubing and packer and return well to injection service.

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

SIGNED D. F. Berlin TITLE Area Engineer DATE 11-11-75

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: