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LAND OFFICE		
OPERATOR		

HOBBS OFFICE O. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION
APR 27 3 25 PM '67

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 H. T. Mattern (NCT-B)	
9. Well No. 5	
10. Field and Pool, or Wildcat Bumont & Penrose Skelly	
12. County Lea	

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 checked="" type="checkbox"/> OTHER- Dual
2. Name of Operator Gulf Oil Corporation
3. Address of Operator Box 670, Hobbs, New Mexico
4. Location of Well UNIT LETTER 0 1980 FEET FROM THE East LINE AND 810 FEET FROM THE South LINE, SECTION 30 TOWNSHIP 21-S RANGE 37-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3498' DF

16.

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

PERFORM REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>
OTHER <input type="checkbox"/>

PLUG AND ABANDON <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>
OTHER <input type="checkbox"/>

REMEDIAL WORK <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>

ALTERING CASING <input type="checkbox"/>
PLUG AND ABANDONMENT <input type="checkbox"/>
OTHER <input type="checkbox"/>

CI Report

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.

Both zones still carried as closed in. No plans have been made at this time for further work on this well.

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

ORIGINAL SIGNED BY
C. D. BORLAND

TITLE **Area Production Manager**

DATE **April 27, 1967**

SIGNED

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: