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# NEW MEXICO OIL CONSERVATION COMMISSION

AUG 18 8 50 PM '69

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name <b>Central Drinkard Unit</b>	
8. Farm or Lease Name	
9. Well No. <b>134</b>	
10. Field and Pool, or Wildcat <b>Drinkard</b>	
12. County <b>Lea</b>	

**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 ☐ GAS WELL ☐ OTHER

2. Name of Operator  
**Gulf Oil Corporation**

3. Address of Operator  
**Box 670, Hobbs, New Mexico 88240**

4. Location of Well  
UNIT LETTER **D** **660** FEET FROM THE **North** LINE AND **990** FEET FROM  
THE **West** LINE, SECTION **32** TOWNSHIP **21-S** RANGE **37-E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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.

**Installed risers and valves above ground level on each casing string. Inspected by Mr. John Bryan. Will fill cellar.**

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

SIGNED <u>C. D. BORLAND</u>	TITLE <u>Area Production Manager</u>	DATE <u>August 18, 1969</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>DISTRICT</u>	DATE <u>AUG 20 1969</u>
CONDITIONS OF APPROVAL, IF ANY:		