| NO. OF COPIES RECEIVED | | | Form C-103 |
|---|---|--|--|
| DISTRIBUTION | | | Supersedes Old C-102 and C-103 |
| SANTA FE | NEW MEXICO OIL CON | SERVATION COMMISSION | Effective 1-1-65 |
| FILE | | | |
| U.S.G.S. | | 1 739 | 5a. Indicate Type of Lease |
| LAND OFFICE | lin. | | State Fee. |
| OPERATOR |] | | 5. State Oil & Gas Lease No. |
| CLINIO | TV NOTICES AND DEPORTS OF | WELL C | |
| 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. | | | 7. Unit Agreement Name |
| OIL GAS OTHER- | | | Central Drinkard Unit |
| 2. Name of Operator | | | 8. Farm or Lease Name |
| Gulf Oil Corporation | | | |
| 3. Address of Operator | | | 9. Well No. |
| Box 670, Hobbs, New Mexico 98240 | | | 157 |
| 4. Location of Well | | | 10. Field and Pool, or Wildcat |
| UNIT LETTER | 660 FEET FROM THE South | LINE AND 660 FEET FR | Drinkard |
| | | | |
| THE LINE, SECT | ION 33 TOWNSHIP 21-5 | RANGENMP | $_{\scriptscriptstyle{M}}$ |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | DP OF CD | |
| | 15. Elevation (Show whether | | 12. County |
| | | 3lilig of DF | Ice \\\\\\\\ |
| Check | Appropriate Box To Indicate 1 | Nature of Notice, Report or C | ther Data |
| NOTICE OF I | NTENTION TO: | SUBSEQUE | NT REPORT OF: |
| | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON : | REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON | | COMMENCE DRILLING OPNS. | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | CHANGE PLANS | CASING TEST AND CEMENT JOB | |
| | | OTHER | |
| OTHER | | | |
| 17 Describe Erocosed or Completed C | perations (Clearly state all pertinent de | August and give pertinent dates, includi | ng estimated date of starting any proposed |
| work) SEE RULE 1103. | | , , , , , , , , , , , , , , , , | eg account and any property and property |
| | | | |
| | | | |
| | valves above ground leve | l on each casing string | . Inspected by John |
| Runyan. Will fill cel | ilar. | | |
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| 18. I hereby certify that the informatio | n above is true and complete to the best | of my knowledge and belief. | |
| | | | |
| ORIGINAL SIGNED |) BY ▲⊷ | | _ |
| SIGNED C. D. BORLAND | TITLE WAS | ea Production Manager | DATE August 22. 1969 |
| / | TITLE | ea Production Manager | DATE August 22, 1969 |
| 11. 11. 11. | | | DATE August 22, 1969 |
| | SI SI | JPERVISOR DISTRICT • | August 1 |
| APPROVED BY | | | DATE |
| APPROVED BY CONDITIONS OF APPROVAL, IF AN | SI SI | | August 1 |