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LAND OFFICE		
OPERATOR		

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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-229-1
7. Unit Agreement Name
8. Farm or Lease Name J. F. Janda (NCT-F)
9. Well No. 9
10. Field and Pool, or Wildcat South Eunice
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 ☒ GAS WELL ☐ OTHER- ☐

2. Name of Operator
Gulf Oil Corporation

3. Address of Operator
P. O. Box 670, Hobbs, N.M. 88240

4. Location of Well
UNIT LETTER J, 1980 FEET FROM THE south LINE AND 1890 FEET FROM THE east LINE, SECTION 4 TOWNSHIP 22S RANGE 36E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3579' GL

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"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <u>Well Status Report</u> <input checked="" type="checkbox"/>
PLUS AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUS AND ABANDONMENT <input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Well has not produced since 1971. Plug and abandon early 1975.

Expires 10/11/75

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

SIGNED B. J. Bamber TITLE Area Engineer DATE 10-15-74

PROVED BY Joe D. Ramsey TITLE Dist. I, Supv. DATE

CONDITIONS OF APPROVAL, IF ANY: