

OIL CONSERVATION DIVISION  
P. O. BOX 2058  
SANTA FE, NEW MEXICO 87501

Form C-101  
Revised 10-1-78

RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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	
Central Drinkard Unit	
9. Well No.	
413	
10. Field and Pool, or Wildcat	
Drinkard	
11. Elevation (Show whether DF, RT, GR, etc.)	
3472' GL	
12. County	
Lea	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO UNPLUG OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" FORM C-101 FOR SUCH PROPOSALS.)

OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>
Name of Operator		
Gulf Oil Corporation		
Address of Operator		
P. O. Box 670, Hobbs, NM 88240		
Location of Well		
UNIT LETTER	B	910 FEET FROM THE North LINE AND 1857 FEET FROM
THE	East	LINE, SECTION 29 TOWNSHIP 21S RANGE 37E NMPM.

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 ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER ☐

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOBS ☐

OTHER Equip to Pump ☒

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

POH with packer and tubing. GIH with MA, perf sub, SN, 2-3/8" tubing to 6479'.  
GIH with pump and rods. Set PU. Install electricity. Pumped 5 BO, 14 BW, 1.3 MCF/D.  
Would not flow before. Complete after equipping to pump 4-12-83.

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

SIGNED R. D. Pite

TITLE Area Engineer

DATE 4-26-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APR 28 1983

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

RECEIVED

APR 27 1983

O.C.D.  
HOBBS OFFICE