## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| OPPHATOR               | 7 | Ĭ |

## OIL CONSERVATION DIVISION

| <u> </u>  | TRIBUTION                    |                            | P. O. 80                              |                                   |                              | Form C-103<br>Revised 19-1-78 |  |  |
|---|------------------------------|----------------------------|---------------------------------------|-----------------------------------|------------------------------|-------------------------------|--|--|
| FILE  |                              | 1-1-1                      | SANTA FE, NEW                         | / MEXICO 87501                    |                              |                               |  |  |
| U.\$.G.\$   |                              |                            |                                       |                                   | ļ                            | Type of Lease                 |  |  |
| LAND (  | DEFICE                       |                            |                                       | **                                | State                        | Foe X                         |  |  |
| ОРЕНА   | TOA                          |                            |                                       |                                   | 5, State Oil                 | 6 Gas Leaso No.               |  |  |
|   | <del></del>                  | SUNDRY MOTICE              | S AND REPORTS ON                      | WELLS                             | minh                         | mmmm                          |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  100 NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  105 "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) |                              |                            |                                       |                                   |                              |                               |  |  |
| 1.  |                              |                            |                                       |                                   | 7. Unit Agree                | ement Nume                    |  |  |
| 01L<br>WELL   | GAS WELL.                    | X OTHER-                   |                                       |                                   | Central                      | Drinkard Unit                 |  |  |
| 2. Name of Op   |                              |                            |                                       |                                   | 8. Farm or L                 | ease Nume                     |  |  |
| GULF OI   | L CORPORAT                   | CION                       |                                       |                                   | 9. Well No.                  |                               |  |  |
| 1   |                              | obs, NM 88240              |                                       |                                   | 432                          |                               |  |  |
| 4. Location of  |                              | 755, NII 00240             | · · · · · · · · · · · · · · · · · · · |                                   |                              | d Pool, or Wildcat            |  |  |
| UNIT LETT   | P P                          | 110                        | SET PROM THE South                    | LINE AND 150                      | Drinkard Drinkard            | <u>l</u> .                    |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
| THE E   | ast                          | NE, SECTION 29             | TOWNSHIP 21S                          | RANGE 37E                         | NMPM.                        |                               |  |  |
| mm  | mm                           | ammin                      | 5. Elevation (Show whether            | DF RT GR etc.)                    | 12. County                   | <del>777//////////</del>      |  |  |
|   |                              |                            | 3465' GL                              |                                   | Lea                          |                               |  |  |
| 16.   | 7777777                      | Chack Appropriate          |                                       | Nature of Notice, Rep             | <del></del>                  |                               |  |  |
|   |                              | E OF INTENTION             |                                       | •                                 | BSEQUENT REPORT              | OF:                           |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
| PERFORM REMI  | EDIAL WORK                   |                            | PLUG AND ABANDON                      | REMEDIAL WORK                     |                              | LTERING CASING                |  |  |
| TEMPORARILY   | ABANDON []                   |                            |                                       | COMMENCE DRILLING OPHS.           |                              | THEMHODHABA DHA DU.           |  |  |
| PULL OR ALTER   | CASING [                     |                            | CHANGE PLANS                          | CASING TEST AND CEMENT            |                              |                               |  |  |
|   |                              |                            | П                                     | OTHER FILLED &                    | inspected cellar             | ·                             |  |  |
| OTHER   |                              |                            |                                       | •                                 |                              |                               |  |  |
|   | roposed or Com               | pleted Operations (Cle     | arly state all pertinent det          | cils, and give pertinent date     | es, including estimated date | of starting any proposed      |  |  |
| •   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       | 2-28-80 to comp1                  |                              |                               |  |  |
|   |                              | $5\frac{1}{2}$ " csg to 40 |                                       | [) in <mark>spect</mark> ed cella | i; illied cellar             | α set                         |  |  |
| anenors   | · Tebted                     | J-2 CBG CO 40              | oon or.                               |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              | •                             |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              | •                          |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              | •                          |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
|   |                              |                            |                                       |                                   |                              |                               |  |  |
| 18. I hereby ce   | rtily that the in            | formation above is true    | and complete to the best of           | of my knowledge and belief.       |                              |                               |  |  |
|   | 10                           | 0.ls                       |                                       |                                   |                              |                               |  |  |
| *16460  | 11. 8.                       | Dikes A.                   | TITLE A                               | rea Engineer                      | DATE                         | 2-29-80                       |  |  |
| * A TORON BENEFIT EL  |                              | Na s                       |                                       |                                   |                              |                               |  |  |
|   | Vi I                         | tre divine                 |                                       |                                   | N.                           | de fa                         |  |  |
| APPROVED BY   | <del>- <b>/</b>/// ,</del> 5 | list 1, Super              | * TITLE                               |                                   | DATE DE                      |                               |  |  |
| CONDITIONS C  | OF APPROVAL,                 | IF ANYIT'S                 |                                       |                                   |                              |                               |  |  |