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LAND OFFICE	
OPERATOR	

NEW MEXICO OFFICE O.C.C.
NEW MEXICO CONSERVATION COMMISSION

JUN 17 3 27 PM '68

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

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.

B-1732

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name Harry Leonard (NCT-C)
3. Address of Operator Box 670, Hobbs, New Mexico 88240	9. Well No. 7
4. Location of Well UNIT LETTER G , 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 21-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat Arrowhead
15. Elevation (Show whether DF, RT, GR, etc.) 3507' GL	12. County Lea

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"/>	

Returned well to production

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.

3805' TD.

Well has been carried as shut in. Fished parted rods. Replaced partial rod string. Ran GOR test and returned well to production.

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

ORIGINAL SIGNED BY
C. D. BORLAND

SIGNED _____

TITLE **Area Production Manager**

DATE **June 17, 1968**

APPROVED BY **John W. Runyan**

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: