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# NEW MEXICO OIL CONSERVATION COMMISSION

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

**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 - "A" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator  
**Gulf Oil Corporation**

Address of Operator  
**Box 670, Hobbs, N.M. 88240**

Location of Well  
UNIT LETTER **J** **4303'** FEET FROM THE **south** LINE AND **2317'** FEET FROM  
THE **east** LINE, SECTION **2** TOWNSHIP **21S** RANGE **37E** N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)  
**3496' GL**

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name  
**Harry Leonard (NCT-F)**

9. Well No.  
**1 7**

10. Field and Pool, or Wildcat  
**Tubb Oil**

12. County  
**Lea**

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 JOBS <input type="checkbox"/>	
		OTHER <b>Acidized</b> <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 1503.

6609' PB.

Pumped 750 gallons 15% NE acid down casing over Tubb perforations 6387' to 6564'.

Flushed with 50 barrels of oil. Returned well to production.

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

SIGNED **D.F. Berlin** TITLE **Area Engineer** DATE **4-22-76**

APPROVED BY **Dist 1, S.G.S.** TITLE \_\_\_\_\_ DATE **APR 26 1976**

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 23 1976

OIL CONSERVATION COMM.  
HOBBS, N. M.

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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>B-1732</b>

## 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 Range
2. Name of Operator <b>Gulf Oil Corporation</b>	8. Term or Lease Term <b>Harry Leonard (NCT-F)</b>
3. Address of Operator <b>Box 670, Hobbs, New Mexico 88240</b>	9. Well No. <b>7</b>
4. Location of Well UNIT LETTER <b>J</b> <b>4303'</b> FEET FROM THE <b>South</b> LINE AND <b>2317'</b> FEET FROM THE <b>East</b> LINE, SECTION <b>2</b> TOWNSHIP <b>21-S</b> RANGE <b>37-E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Tubb Oil</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3496' GL</b>	12. County <b>Lea</b>

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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>
<b>Acidized</b>			

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.

6609' PB.

Pumped 1000 gallons of 15% NE acid down 7" casing over Tubb perforations 6387' to 6564'. Flushed with 50 barrels of water. Returned well to production.

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

SIGNED D.T. Berlin TITLE Area Engineer DATE October 14, 1975

APPROVED BY John Runyan TITLE  DATE 1975  
CONDITIONS OF APPROVAL, IF ANY:

SA TAFE			
FILE			
G.S.			
ID OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-111  
Effective 1-1-85

I. Operator  
**Gulf Oil Corporation**  
Address  
**Box 670, Hobbs, New Mexico 88240**  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
**Change in transporters, effective December 1, 1974.**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Harry Leonard (NCT-F)</b>	Well No. <b>7</b>	Pool Name, Including Formation <b>Tubb Oil</b>	Kind of Lease State, Federal or Fee <b>State</b>	Lease No. <b>B-1732</b>
Location Unit Letter <b>J</b> ; <b>4303</b> Feet From The <b>South</b> Line and <b>2317</b> Feet From The <b>East</b> Line of Section <b>2</b> Township <b>21-S</b> Range <b>37-E</b> , NMPM, <b>Lea</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Shell Pipe Line -Corporation</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1910, Midland, Texas 79701</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Warren Pet Corp.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1589, Tulsa, Oklahoma 74100</b>	
<b>Skelly Oil Co.</b>	<b>Box 1135, Eunice, New Mexico 88231</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>0</b>	Sec. <b>2</b>
	Twp. <b>21-S</b>	Rge. <b>37-E</b>
	Is gas actually connected? <b>Yes</b> When <b>December 1, 1974</b>	

If this production is commingled with that from any other lease or pool, give commingling order number:

**PC-489**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)


Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)

**Area Production Manager**  
(Title)

**December 9, 1974**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.