	•		
N 1. OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO O	IL CONSERVATION COMMISSION	Effective 1-1-65
FILE	·		
U.S.G.S.			Sa. Indicate Type of Lease
LAND OFFICE	1		State X Fee
OPERATOR	1	•	5. State Oil & Gas Lease No.
0, 5, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,	ı		B-1732
CINDS	NOTICES AND DEDO	DIE ON WELLS	
OO NOT USE THIS FORM FOR PAGE	RY NOTICES AND REPOR	OR PLUG BACK TO A DIFFERENT RESERVOIR.	
USE "APPLICAT	TOU FOR PERMIT (FORM C-10	11 FOR SUCH PROPOSALS.)	7. Unit Agreement Name
;!,   OIL	_		
well well .	OTHER-		8. Farm or Lease Name
2. Nume of Operator			1
GULF OIL CORPORATION			Harry Leonard (NCT-C)
: Address of Operator			
P.O. Box 670, Hobbs, N	м 88240		13
i. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER B	510 FEET FROM THE N	orth Line and 1780 FEET	Drinkard Drinkard
UNIT LETTER			
Fact	36	21S RANGE 36E	WMPM.
THE East LINE, SECTION	ON TOWNSHIP	ZID RANGE JOE .	
mmmmm	15 Flevation (Shor	v whether DF, RT, GR, etc.)	12. County
		505' GL	Lea
Check	Appropriate Box To Ind	licate Nature of Notice, Report o	r Other Data
NOTICE OF IN	NTENTION TO:	SUBSEQU	JENT REPORT OF:
,	•		_
PERFORM REMEDIAL WORK	PLUG AND ABAI	NDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
POLE ON ALTER GROWN		OTHER	
OTHER Squeeze TA'd Bline	ebry zone	XX	
17. Describe Frogosed or Completed Op	perations (Clearly state all per	tinent details, and give pertinent dates, incl	luding estimated date of starting any proposed
work) SEE RULE 1103.	•		
in the gross interval ! 14# csg); spot cmt slu	5512-5827' w/42 sx rry from 5700' up t	? 5725'; cap w/2 sx frac sd Class "C" cmt + 2% CaCl <sub>2</sub> (4 to 5440'. WOC overnite. Ta nebry perfs to 300 psi. R	$400$ ' of fill in $5\frac{1}{2}$ " ag cmt top. Drl out
ppg eqpt & return Drink			
ppg eqpt & return brin	kard zone to produc	. LONG	
		·	•
			••
			••
			٠.
			٠.
			•
			••
			••
			••
		·	
	· ·	she heat of my knowledge and belief.	••
in. I hereby certify that the information	I above is true and complete to	the best of my knowledge and belief.	••
in. I hereby certify that the information	s above is true and complete to		•
in. I hereby certify that the information	1-	the best of my knowledge and belief.	DATE
Gener Sup X	time.	Mus Area Engineer	DATE
Sup X	Signed by	Mus Area Engineer	
Sup X	Signed by	Area Engineer	
Sup X	Signed by Clarents	Mus Area Engineer	

JUL 2 3 1979

O.C.D. HOBBS, OFFICE