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LAND OFFICE	
OPERATOR	

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

JUN 6 3 41 PM '67

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

5a. Indicate Type of Lease	State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
South Penrose Skelly Unit	
8. Farm or Lease Name	
9. Well No.	
137	
10. Field and Pool, or Wildcat	
Penrose Skelly	
12. County	
Lea	

**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"/>	2. Name of Operator
Gulf Oil Corporation	
3. Address of Operator	
Box 670, Hobbs, New Mexico 88240	
4. Location of Well	
UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM West THE LINE, SECTION 4 TOWNSHIP 22-S RANGE 37-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	
3431' GL	

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"/>	
		CI Report	

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.

Well still carried as closed in. No plans have been made at this time for further work on this well.

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

ORIGINAL SIGNED BY	TITLE	DATE
SIGNED C. D. BORLAND	Area Production Manager	June 6, 1967
APPROVED BY	TITLE	DATE
Leslie A. Clements		
CONDITIONS OF APPROVAL, IF ANY:		