

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 12-1-

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease
State ☐ For ☒
5. State Oil & Gas Lease No.

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 ☒ GAS ☐ OTHER ☐
2. Name of Operator Gulf Oil Corporation
3. Address of Operator P.O. Box 670, Hobbs, NM 88240
4. Location of Well
UNIT LETTER F 1980 FEET FROM THE North LINE AND 1980 FEET FROM
THE West LINE, SECTION 5 TOWNSHIP 22S RANGE 37E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3451' GL
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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER <u>Repair Csg</u>	

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.

POH w/ production eqpt. Set RBP @ 3000', test csg + RBP 500# - OK.
Cap w/ 10' frac sand. Perf @ 1210' w/ (4) 1/2" JH. Set cmt retainer
@ 1108', test thg 3000#. Establish injection rate. Pmp 300 24
CL "C" w/ 4% gel + CaCl₂ plus 100 24 CL "C" meat. Squeeze 3 BPM
1200#. WOC. Tag cmt 1100'. Inl cmt + cmt retainer. Circ hole.
Mask sand off RBP. ^{POH} Clean out to 3760'. Acz w/ 3000 gals 15% NEFE
HCL, 300# rock salt. AIR 5 BPM, ISIP vac, avg pres 600#. Swab.
G/H w/ production eqpt. Rpd 6 BO, 52 BW, 11 MCF gas. Before, 5 BO,
15 BW, 3 MCF gas.

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

Signed JD Pate TITLE AREA ENGINEER DATE 8-23-83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 25 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 24 1983

O.C.D.
HOBBS OFFICE