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NEW MEXICO OIL CONSERVATION COMMISSION  
 MAR 30 3 31 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.	

### 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name <b>South Penrose Skelly Unit</b>
2. Name of Operator <b>Gulf Oil Corporation</b>		8. Farm or Lease Name
3. Address of Operator <b>Box 670, Hobbs, New Mexico</b>		9. Well No. <b>105</b>
4. Location of Well UNIT LETTER <b>B</b> , <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>5</b> TOWNSHIP <b>22-S</b> RANGE <b>37-E</b> NMPM.		10. Field and Pool, or Wildcat <b>Penrose Skelly</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3459' DF</b>		12. County <b>Lea</b>

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 JOBS <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.**

THE COMMISSION MUST BE ADVISED

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

ORIGINAL SIGNED BY

SIGNED **C. D. BORLAND** TITLE **Area Production Manager** DATE **March 28, 1967**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: