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NEW MEXICO OIL CONSERVATION COMMISSION

Nov 9 3 44 PM '65

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

5a. Indicate Type of Lease
State ☐   Fee. ☒

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 WELL ☒   GAS WELL ☐   OTHER-

2. Name of Operator

Gulf Oil Corporation

3. Address of Operator

Box 670, Hobbs, New Mexico

4. Location of Well

UNIT LETTER __M__ , __660__ FEET FROM THE __South__ LINE AND __660__ FEET FROM

THE __West__ LINE, SECTION __5__ TOWNSHIP __22-S__ RANGE __37-E__ NMPM.

7. Unit Agreement Name

South Penrose Skelly Unit

8. Farm or Lease Name

9. Well No.

133

10. Field and Pool, or Wildcat

Penrose Skelly

15. Elevation (Show whether DF, RT, GR, etc.)

3444 GL

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER __Clean out, run liner, perf & convert to water injection.__ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER _____ ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

Clean out with sand pump to 3750'. Run 4-1/2" 9.50# J-55 ST&C casing as liner and set at 3750', top at 3150'. Cement with 120 sacks of cement. If cement does not circulate, will run TS. Perforate liner with 4, 1/2" JHPF at approximately 3683' to 3732'. Run tubing and FB packer. Set packer in top of liner and acidize with 3000 gallons of 15% NEA. POH. Run 2-3/8" plastic coated tubing and Baker Model "AD" tension type packer and set packer at 3300'. When injection system is ready, start injecting water.

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

SIGNED ORIGINAL SIGNED BY C. D. BORLAND   TITLE **Area Production Manager**   DATE **November 9, 1965**

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: