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

JAN 21 3 57 PM '66

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
8. Farm or Lease Name H. T. Mattern (NCT-D)
9. Well No. 3
10. Field and Pool, or Wildcat Arrowhead
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
4. Location of Well UNIT LETTER F , 2310 FEET FROM THE North LINE AND 1650 FEET FROM THE West LINE, SECTION 7 TOWNSHIP 22-S RANGE 37-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3441 GL

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

3750' TD.

Well uneconomical to produce. To be 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.

SIGNED _____ TITLE **Area Production Manager** DATE **January 21, 1966**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: