

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-101
Revised 10-1-70

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

1a. Indicate Type of Lease
State ☐ For ☒
5. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO STEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT TO DRILL" FORM C-101 FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER _____
2. Name of Operator
Gulf Oil Corp.
3. Address of Operator
P. O. Box 670, Hobbs, NM 88240
4. Location of well
UNIT LETTER C 660 FEET FROM THE South LINE AND 1900 FEET FROM
THE East LINE, SECTION 22 TOWNSHIP 22S RANGE 37E NMPM.

7. Unit Agreement Name
8. Farm or Lease Name
Ollie I. Boyd
9. well No.
2
10. Field and Pool, or Wildcat
Elm City Oil
12. County
Lea

15. Elevation (Show whether DF, RT, GK, etc.)
3326' GL

16. 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 _____		OTHER <u>Recompletion</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.

Jag ent 26747' + top 57 plug 2799' Sol plug + ent to 2926' Cile
clian. Jag ent + 12.7 plug 5750' to 5743-5300. Rev 5810-14'
5770-74' 5712-11. 5654-58. 5610-14' (12) 1/2" 5" 2pt acid. Ac. 4/7500
gals 15% LEFF + 10% PM. 10% AP. 7 RPT. 151P 100#. Swab. Frac
w/40,000 gal gel 125,000# sand 32 RCT. AP 14.3PM @ 3195#.
Swab. 2' x 1.531" + 1/2" MA + SN. 2' 4" pmp + rods. Tail CI pending
lease rights study.

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

SIGNED RDPithe TITLE PREP. ENGINEER DATE 10-1-84

APPROVED BY _____ TITLE _____ DATE 001 16 1984

CONDITIONS OF APPROVAL, IF ANY: