NO. OF COPIES RECEIVED		Form C-103	
DISTRIBUTION		Supersedes Old C-102 and C-103	
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65	
FILE			
U.S.G.S.	JUN 8 3 27 PM *66	5a. Indicate Type of Lease	
LAND OFFICE	State Fee 🗶		
OPERATOR		5. State Oil & Gas Lease No.	
	-	· ·	
(DO NOT USE THIS FORM FOR PR	RY NOTICES AND REPORTS ON WELLS prosals to drill or to deepen or plug back to a different reservoir. Ion for permit -" (form C-101) for such proposals.)		
1. OIL GAS WELL WELL	OTHER.	7. Unit Agreement Name	
2. Name of Operator		8. Farm or Lease Name	
Gulf Oil Corporation	Scarborough		
3. Address of Operator		9. Well No.	
For 670 Hobbs Nort Mor	i na	0	
Box 670, Hobbs, New Mex	100	2	
4. Location of Well		2 10. Field and Pool, or Wildcat	
4. Location of Well	80 FEET FROM THE North 660 FEET	Blinebur Gee	
4. Location of Well UNIT LETTER <u>H</u> , <u>18</u>	80 FEET FROM THE North LINE AND 660 FEET	Blinebur Gee	
4. Location of Well UNIT LETTER <u>H</u> , <u>18</u>	80 FEET FROM THE North LINE AND 660 FEET	Blinebur Gee	
4. Location of Well UNIT LETTER <u>H</u> , <u>18</u>	80FEET FROM THENorth 660FEET ONTOWNSHIP22-SRANGE38-EN	FROM Blinebry Gas	
4. Location of Well UNIT LETTER <u>H</u> , <u>18</u>	<b>80</b> FEET FROM THE <b>North</b> LINE AND <u>660</u> FEET on <u>31</u> TOWNSHIP <u>22-S</u> RANGE <u>38-E</u> N 15. Elevation (Show whether DF, RT, GR, etc.)	FROM Blinebry Gas	
4. Location of Well UNIT LETTER <u>H</u> , <u>18</u> THE <u><b>Best</b></u> Line, section	80 FEET FROM THE North LINE AND 660 FEET on 31 TOWNSHIP 22-S RANGE 38-E N 15. Elevation (Show whether DF, RT, GR, etc.) 33571 GL	FROM Blinebry Gas	
4. Location of Well UNIT LETTER <u>H</u> , <u>18</u> THE <u><b>Best</b></u> Line, section	80 FEET FROM THE North LINE AND 660 FEET on 31 TOWNSHIP 22-S RANGE 38-E N 15. Elevation (Show whether DF, RT, GR, etc.) 33571 GL	FROM Blinebry Gas	
4. Location of Well UNIT LETTER H, 18 THE East LINE, SECTION 16. Check	80 FEET FROM THE North LINE AND 660 FEET ON 31 TOWNSHIP 22-S RANGE 38-E N 15. Elevation (Show whether DF, RT, GR, etc.) 3357' GL Appropriate Box To Indicate Nature of Notice, Report of	FROM Blinebry Gas	
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4. Location of Well UNIT LETTER <u>H</u> , <u>18</u> THE <u><b>Best</b></u> LINE, SECTION 16. Check NOTICE OF IN	80 FEET FROM THE North LINE AND 660 FEET ON 31 TOWNSHIP 22-S RANGE 38-E N 15. Elevation (Show whether DF, RT, GR, etc.) 3357' GL Appropriate Box To Indicate Nature of Notice, Report of NTENTION TO: SUBSEQU	FROM Blinebry Gas	
4. Location of Well UNIT LETTER H, 18 THE	80       FEET FROM THE       North       LINE AND       660       FEET         ON       31       TOWNSHIP       22-S       RANGE       38-E       N         IS. Elevation (Show whether DF, RT, GR, etc.)         3357'       GIJ         Appropriate Box To Indicate Nature of Notice, Report of NUTENTION TO:         PLUG AND ABANDON	FROM Blinebry Gas	
4. Location of Well UNIT LETTER H, 18 THE East LINE, SECTION 16. Check NOTICE OF IN PERFORM REMEDIAL WORK TEMPORAFILY ABANDON	80       FEET FROM THE       North       LINE AND       660       FEET         ON       31       TOWNSHIP       22-S       RANGE       38-E       N         IS. Elevation (Show whether DF, RT, GR, etc.)         3357' GIJ         Appropriate Box To Indicate Nature of Notice, Report of NUTENTION TO:         PLUG AND ABANDON         REMEDIAL WORK         COMMENCE DRILLING OPNS.	FROM Blinebry Gas	
4. Location of Well UNIT LETTER H, 18 THE East LINE, SECTION 16. Check NOTICE OF IN PERFORM REMEDIAL WORK TEMPORAFILY ABANDON	80       FEET FROM THE       North       LINE AND       660       FEET         ON       31       TOWNSHIP       22-S       RANGE       38-E       N         15. Elevation (Show whether DF, RT, GR, etc.)       3357'       GL       N         Appropriate Box To Indicate Nature of Notice, Report or SUBSEQU         PLUG AND ABANDON       REMEDIAL WORK       COMMENCE DRILLING OPNS.         CHANGE PLANS       CASING TEST AND CEMENT JOB       C	FROM Blinebry Gas	

work) SEE RULE 1103.

## Well still 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	C. D. BORLAND	TITLE.	Area	Production Manager	DATE JUN	<b>1, 196</b> 6
APPROVED BY	OF APPROVAL, IF ANY:	TITLE_			DATE	