

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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

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  
P. O. Box 670, Hobbs, NM 88240

4. Location of Well  
UNIT LETTER P 660 FEET FROM THE South LINE AND 330 FEET FROM  
THE East LINE, SECTION 1 TOWNSHIP 22S RANGE 37E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name  
Alice Paddock

9. Well No.  
9

10. Field and Pool, or Wildcat  
Wantz Granite Wash

12. County  
Lea

15. Elevation (Show whether DF, RT, GR, etc.)  
3349' 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"/>	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 <u>Plug back to 7504-7580' and test</u> <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

POH with production equipment. Set a CIBP @ 7650'. Test casing to 500#. Perforate 7504-06, 7518-20, 7529-31, 7548-50, 7567-69, and 7578-80 with 2-1/2" burrless JHPF (24 holes). Put spot acid away with a total of 5 bbls. fluid. Swab and test well. Acidize with 6000 gals 15% NEFE "slik" HCL. Drop 40-7/8" balls. Flush to perforations with 44 bbls 1% FWKCL. Swab and test well.

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

SIGNED R. D. Pitzer TITLE Area Engineer DATE 2-27-81

APPROVED BY Jerry Sexton TITLE District Supervisor DATE MAR 5 1981