NO. OF COPIES RECEIVED	***		uni.	Form C+103	
DISTRIBUTION				Supersedes Old C-102 and C-103	
SANTA FE	NEW ME	XICO OIL CON	SERVATION COMMISSION	Effective 1-1-65	•
FILE					
U.S.G.S.			•	5a. Indicate Type of Leas	se
LAND OFFICE				State XX	Foe
OPERATOR	† 		/	5. State Oil & Gas Lease	» No.
				B-1732	
C1	INDRY NOTICES AND	PEPORTS OF	JWELLS		HIIIII
(DO NOT USE THIS FORM F	OR PROPOSALS TO DRILL OR TO PLICATION FOR PERMIT -" (FO	O DEEPEN OR PLUG	NELLS BACK TO A DIFFERENT RESERVOIR.		
1.				7. Unit Agreement Name	*******
OIL GAS WELL WELL	West Dollarhide	West Dollarhide Devonia			
Name of Operator	8. Farm or Lease Name	Unit			
GULF OIL CORPO	MULTUN AC		•		OILLO
. Address of Operator	/IMITAON			9. Well No.	
P. O. Box 670	114				
4. Location of Well				10. Field and Pool, or W.	ildeat
	Dollarhide Dev	ເດກາ an			
UNIT LETTER	FEET FROM	THE	1 LINE AND 780 FEET	THITTING WORK	viiiiii
East					
THELINE,	SECTIONT	OWNSHIP	S RANGE 38E N	MPM. (
	15. Elevat	tion (Show whethe	r DF, RT, GR, etc.)	12. County	HHH
		3154' GL		Lea	
16. Ch	ack Appropriate Box		Nature of Notice, Report or		********
	OF INTENTION TO:	10 Indicate	•	ENT REPORT OF:	
NOTICE	OF INTENTION TO:		SOBSEQU	ENT REPORT OF:	
	Di ue	AND ABANDON	REMEDIAL WORK	**	
PERFORM REMEDIAL WORK	PLUG	AND ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASI	==
TEMPORARILY ABANDON	· .	GE PLANS	CASING TEST AND CEMENT JOB	PLUG AND ABAN	IDONMENT []
PULL OR ALTER CASING	CHAN	GE PEANS	OTHER		
OTHER			2 2		
VINER					
	eted Operations (Clearly star	te all pertinent de	tails, and give pertinent dates, incli	iding estimated date of starting	any proposed
work) SEE RULE 1103.					
מת במסוים	or • mo				
8108 PB. 812	TD.				
Dol Dolean Tole	Cot wirm DOII (OTH// 10 1	sit & and demonstrate of	OFO! Cime hele ad	/
flu Dan 253	sta 2-3/811 than	7711 Tok-Set	oit & csg scraper to 7 c pkr. Set pkr @ 7807	1 m/0 roints compre	pkr
hald ok Patr	irned to water in	iection	par. Det par a 1001	wy y pormes compre	SPTOIL
nera or. neoc	THEG OF WAGEL TH	Jecoron.			
Hanla	0/01/00				
Work performed	3/24/79				
				_	
				•	•
•					
	•				
18. I hereby certify that the infor	mation above is true and cor	mplete to the best	of my knowledge and belief.		-,
	$\circ L$				
	iker M.		Area Engineer	2nd ma	,
- IGHED	=======================================	TITLE	Area migniegi	DATE	
	U	F-57		1 m _	
•	rig digrad	. by		MAR 3	0 1070

CHOKETE

CONDITIONS OF APPROVAL, IF ANY:

BIL BORNESCHUALION COME