NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION		Supersedes Old
SANTA FE			C-102 and C-103 Effective 1-1-65
FILE			Ellective I-I-02
U.S.G.S.	_		5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR			5. State Oil & Gas Lease No.
			B-1732
SUNDE SUNDE THIS FORM FOR PRINCE STAPPLICATE	RY NOTICES AND REPORTS (OPOSALS TO DRILL OR TO DEEPEN OR PLL TION FOR PERMIT - " (FORM C-101) FOR	ON WELLS G BACK TO A DIFFERENT RESERVOIR. SUCH PROPOSALS.	
1.			7. Unit Agreement Name
OIL GAS WELL OTHER- West Do			Dollarhide Devonian Unit
2. Name of Operator			8. Farm or Lease Name
Gulf Oil Corporation		,	
3. Address of Operator			9. Well No.
Box 670, Hobbs, New Mexico 88240			115
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER E 1650 FEET FROM THE NORTH LINE AND 330 FEET FROM			Dollarhide Devonian
THE West LINE, SECTION 4 TOWNSHIP 25-S RANGE 38-E NMPM.			
TOWNSHIP RANGE NMPM.			**(
	15. Elevation (Show wheth	er DF, RT, GR, etc.)	12. County
		3147' GL	Lea
Check		Nature of Notice, Report or C	
NOTICE OF IN	TENTION TO:	Superous	other Data NT REPORT OF:
		308320021	NI REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOS	PLUG AND ABANDONMENT
		OTHER	
OTHER			
17. Describe Proposed or Completed On	aration (Classic VIII)	Acidized	
work) SEE RULE 1 103.	elations (Clearly State att pertinent a	etails, and give pertinent dates, includi	ng estimated date of starting any proposed
14 barrels of water. M	io' to /890' down tubin [aximum pressure 2850#, Pulled tubing and pa	ISIP 1250#, after 5 mir cker. Ran 2-3/8" tubing	15% NE acid. Flushed with
The same same same sector	ned well to production	•	
•			
18. I hereby certify that the information a	above is true and complete to the best	of my knowledge and belief.	
2/1/80			
SIGNED 1. Y. Will	Blake TITLE	Area Engineer	December 15, 1972
			UAIL
C	Orig. Signed by		= :0 1072
PPROVED BY	Joe D. Ramey		DEC 18 1972
CONDITIONS OF APPROVAL, IF ANY:	Dist. I, Supv.		DATE