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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
6. State Oil & Gas Lease No.
B-158-1

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Gulf Oil Corporation	
3. Address of Operator	9. Well No.
P. O. Box 980, Kermit, Texas	106
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER N , 660 FEET FROM THE West LINE AND 660 FEET FROM	Langlie Mattix
THE South LINE, SECTION 2 TOWNSHIP 25S RANGE 37E N.M.P.M.	
11. Elevation (Show whether DF, RT, GR, etc.)	12. County
3144' DF	Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Clean out and run liner <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <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 103.

Propose to clean out well to 3414'. Run 5" OD slotted liner from 3414' to 3294'. Run tubing to 3404', put well back on pump.

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

SIGNED H. F. Swannack TITLE Area Production Manager DATE October 16, 1968
H. F. Swannack

APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: