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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 ☐ 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Gulf Oil Corporation 3. Address of Operator P. O. Box 980, Kermit, Texas 4. Location of Well UNIT LETTER D 660 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 11 TOWNSHIP 25S RANGE 37E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3134' DF | 7. Unit Agreement Name Stuart Langlie Mattix Unit 8. Farm or Lease Name Langlie Mattix 9. Well No. 110 10. Field and Pool, or Wildcat Langlie Mattix 12. County Lea |
|--|---|

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

| | |
|--|---|
| NOTICE OF INTENTION TO: | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| OTHER Clean out and run liner <input checked="" type="checkbox"/> | OTHER <input type="checkbox"/> |
| PLUG AND ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| CHANGE PLANS <input type="checkbox"/> | PLUG AND ABANDONMENT <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.

Propose to clean out well to 3430', deepen well to 3484'.
Run 4-1/2" OD slotted liner from 3484' to 3260'. Run tubing
to 3474', 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. Swannick TITLE Area Production Manager DATE October 16, 1968

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: