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NEW MEXICO OIL CONSERVATION COMMISSION

FEB 25 1 39 PM '66

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

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
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 <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name Learcy McBuffington
3. Address of Operator P. O. Box 980, Kermit, Texas	9. Well No. 12
4. Location of Well UNIT LETTER I , 1650 FEET FROM THE South LINE AND 990 FEET FROM THE East LINE, SECTION 13 TOWNSHIP 25S RANGE 37E NMPM.	10. Field and Pool, or Wildcat Justis Blinebry
15. Elevation (Show whether DF, RT, GR, etc.) 3088' DF	12. County Lea

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

PERFORM REMEDIAL WORK <input 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 <input 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 checked="" type="checkbox"/> Pumping Equipment

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.

Installed beam pumping equipment. On a 24 hours test ending 10:00 A. M., 2-23-66, pumped 39 BO, 0 BW, 12 x 74" SPM thru 2" tubing. GV = 13 MCF, GOR = 333.

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

SIGNED W. W. Whitaker TITLE Area Engineer DATE 2-24-66

W. W. Whitaker

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: