

COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

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"/>
5. State Oil & Gas Lease No.	
B-1732	

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection Well		7. Unit Agreement Name	
		West 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		105	
4. Location of Well		10. Field and Pool, or Well Unit	
UNIT LETTER L 1650 FEET FROM THE South LINE AND 330 FEET FROM		Dollarhide Devonian	
THE West LINE, SECTION 33 TOWNSHIP 24-S RANGE 38-E NMPM.			
15. Elevation (Show whether DF, RT, GR, etc.)		12. County	
3177' GL		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 type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <u>Perforate additional zone and acidize</u> <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 1103.

8630' PB.

Pull injection equipment. Perforate upper Devonian zone in 5-1/2" casing with 1/2" JHPF at 7704' to 7736'. Run treating equipment and treat old perforations 7842' to 7890' with 1000 gallons of 28% NE acid. Flush with brine water. Treat new perforations 7704' to 7736' with 1000 gallons of 28% NE acid. Flush with brine water. Pull treating equipment. Run single string of 2-3/8" plastic coated tubing with Baker flow control valve at approximately 7850', Baker Lok-Set packer at 7810', Baker flow control valve at approximately 7700' and Baker tension packer at 7660'. Resume injecting water.

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

SIGNED [Signature] TITLE Area Engineer DATE July 8, 1975

APPROVED BY [Signature] TITLE OIL FIELD DATE

CONDITIONS OF APPROVAL, IF ANY: