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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- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name H. Leonard NCT-G
3. Address of Operator P. O. Box 980, Kermit, Texas 79745	9. Well No. 13
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 630 FEET FROM THE East (State Line) 33 TOWNSHIP 24S RANGE 38E NMPM.	10. Field and Pool, or Wildcat Dollarhide Tubb-Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3185' RKB	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 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 <input type="checkbox"/>	OTHER <u>Well closed in</u> <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.

Well closed in. Well to be used for inclusion in waterflood project. This well appears incorrectly in proration schedule as gas well, should be closed in oil well.

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 September 3, 1968

APPROVED BY [Signature] TITLE _____ DATE SEP 5 1968

CONDITIONS OF APPROVAL, IF ANY: