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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-133
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 Carter-Eaves "B"
3. Address of Operator P. O. Box 980, Kermit, Texas	9. Well No. 1
4. Location of Well UNIT LETTER N , 660' FEET FROM THE South LINE AND 1917' FEET FROM THE West LINE, SECTION 6 TOWNSHIP 24-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Langlie - Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3327' GR	12. County Lea

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"/>
DRILL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Well Shut-In <input checked="" type="checkbox"/>

11. 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 Shut-In - To be held for possible inclusion in waterflood.

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

SIGNED M. M. Whitaker TITLE Area Engineer DATE 3-29-65

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: