SHEET OF A CHICAGO MEDICAL STREET		_				
(L CONSERV	ATION DIV	/isior -		
DISTRIBUTION		P. O. BOX 2088			Form C-103	
SANTA FE		SANTA FE, NEW MEXICO 87501				Revised 19-1-7
FILE			W MEXICO 8	7301		
U.\$.0.\$.					5a. Indicate Type	of Lease
LAND OFFICE		•			State XX	Fon
OPERATOR .		•			5. State Oli & Gas	Lease No.
					B-24	31
SUNI POR MADE THIS FORM FOR USE "TAPPOLIS	DRY NOTICES	AND REPORTS OF	BACK YO A DIFFER	ENT RESERVOIR.		
OIL GAS WELL	OTHER-		÷ •		7. Unit Agreement	Name
2. Name of Operator					8. Farm or Lease 1	'ama
Gulf Oil Corpor	ation				J. R. Holt	
3. Address of Operator					9. Well No.	(1/01 11)
P. O. Box 670,	Hobbs, NM	88240		•	5	
4. Location of Well					10. Field and Pool	or Wildcai
UNIT LETTER 0	810	South		1980	Langlie	•
,	7.00	T FROM THE	LINE AND	TOO FEET FROM	TTTTTTTT	MILLIA
THE East LINE, SCO	. 16	2	45	37F		
THE LINE, SE	CTION	TOWNSHIP	NANGE	DIE NMPM.		
	15.	Elevation (Show whether	T. DF. RT. GR etc	•. }	12. County	444444
			5' GL	,	,	XIIIIII
777777777777777777777777777777777777777	7777777	Box To Indicate			Lea	<u> </u>
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CABING	INTENTION	PLUG AND ABANDON X	COMMENCE DRIE		,	G CASING CASING DABANDONMENT
OTHER			1			
17, Describe Proposed or Completed	Operations (Clea	rly state all persinent de	tails and give ne	rtinent dates including	actionated days of su	
POH with production with abandonment	tion equipm t mud. Cut	ent. Set CIBP and pull casi	at 3240', o	cap with 35' ce 00' plug 2400'-	ement. Fill -2300': 161'	hole
plug 1240'-1079 OCD request. Sy location.	'; 100' plu	g across casing	g stub. Ta	g casing shoe a	and stub plue	s per r

Area Engineer

ORIGINAL SIGNED BY

JERRY SEXTON

ONDITIONS OF APPROVAL, IF ANY:

DISTRICT 1 SEPR.

_____ DAT

DEC 20 1982

RECEIVED

DEC 17 1982

O CO.