

OIL CONSERVATION DIVISION

Artesia, New Mexico

June 14, 1982

Gulf Oil Co.
P.O. Box 670
Hobbs, New Mexico 88240

Re: Wells Placed In Pool*

Gentlemen:

As the result of Division Order R-6994 the following described well (s) (~~has~~-have) been placed in the pool (~~s~~) shown below. This change in nomenclature has been made in our files. Please change your records to reflect the proper pool name. All subsequent reports must show this nomenclature until further notice.

DIAMOND MOUND-ATOKA/MORROW GAS

✓Callaway Federal #2	Ut. J	6-16-28
Callaway Federal #3	Ut. S	6-16-28

Transporters are advised, by copy of this letter, to change their records to reflect the pool name as established by this order.

Very truly yours,

Amy Brooks
OIL CONSERVATION DIVISION

Distribution:
Original - Operator
XC: Santa Fe OCD
Each Transporter

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

c/sf

SUNDRY NOTICES AND REPORTS ON WELLS
(Do not use this form for proposals to drill or to deepen or plug back to a well. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Gulf Oil Corporation

3. ADDRESS OF OPERATOR
P. O. Box 670, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
2525' FNL & 1980' FEL

5. LEASE DESIGNATION AND SERIAL NO.
NM-30395

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Callaway Federal

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Diamond Mound Morrow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 6-T16S-R28E

12. COUNTY OR PARISH
Eddy

13. STATE
NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3592' GL

RECEIVED
NM OIL & GAS COMMISSION
JUN 12 1982
ARTESIA, NM 88210
O. C. D.
ARTESIA, OFFICE

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Set Compressor</u>	<input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Set compressor and put well on line 3-8-82 at 1000 MCF.

RECEIVED
APR 6 1982

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED P. D. Pate TITLE Area Engineer DATE 4-2-82

(This space for Federal or State Official Use)

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____

CONDITIONS OF APPROVAL JUN 14 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

See Instructions on Reverse Side