

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ **Water Injection Well**

2. NAME OF OPERATOR
Gulf Oil Corporation

3. ADDRESS OF OPERATOR
Box 670, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3295' GR

5. LEASE OR MINING LOCATION AND SERIAL NO.
NM-06763

6. IF INDICATED, LOTTERY OR TRAIL NAME

7. UNIT ABBREVIATION NAME
No. Hobbsary Later Unit

8. FARM OR RANCH NAME

9. WELL NO.
106

10. FIELD AND POOL, OR WELLS

11. SEC. T. R. S. OR B.L. AND SURVEY AREA
No. Hobbsary Later Seven

12. COUNTY OR PARISH
Eddy New Mexico

1980' FS & KL, Section 23, 19-S, 30-E

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐		

(NOTE: Report results of multiple completion or recompletion report 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 proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and points pertinent to this work.)*

1936' FB.

Loaded casing with 23 barrels of fresh water containing .6% sodium carbonate per barrel.

RECEIVED

APR 18 1969

D. C. C.
ARTESIA, OFFICE

RECEIVED

APR 16 1969

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED ORIGINAL SIGNED BY C. D. BORLAND TITLE Area Production Manager

(This space for Federal or State office use)

APPROVED BY APPROVED CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side

