SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plue back to a different reservoir.  1.  Off. WELL OF APPLICATION FOR PERMIT—" for such proposals.)  1.  Off. WELL OF APPLICATION FOR PERMIT—" for such proposals.)  1.  OFF. WELL OF APPLICATION FOR PERMIT—" for such proposals.)  1.  OFF. WELL OFF.	Form 9-331 (May 1963)		UNITED STATES MENT OF THE INTER	SUBMIT IN TRIPLICATE* (Other instructions on re-	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plue back to a different reservoir.  1.		a a G	Jacarilla Contract #6		
T. UNIT AGREEMENT NAME  OIL WELL OTHER  2. NAME OF OFERATOR GULF OIL Corporation  3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, NM 88240  4. LOCATION OF WILL (Report location clearly and in accordance with any State requirements.*  See Also space 17 below.)  990' FNL & 990' FWL  14. PERNIT NO.  15. ELEVATIONS (Show whether PE, RF, CR, etc.)  6459' GL  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Documents of Notice of Intention to:  TEST WATER SHUT-OFF PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON*  CHANGE PLANS  CHANGE PLANS  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OFERATIONS (Clearly state all pertinent details, and give proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all mathers and zones pertinent to this work.)*  POH with tubing. Set RBP at 6065', had slight bleed off. Found leak below 4037'.				· · · · · · · · · · · · · · · · · · ·	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Gulf Oil Corporation  Apache Federal  Apache Federal  9. Well No.  P. O. Box 670, Hobbs, NM 88240  10. Field And Pool, or Wildcat  See also space I below.)  At surface  990' FNL & 990' FWL  15. Elevations (Show whether De. RT. GR. etc.)  16. Check Appropriate Box Io Indicate Nature of Notice, Report, or Other Pols  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE ABANDON's BIODT OR ACIDIZE BEFARE WELL (Other)  Change Plans (Other)  17. DESCRIBE PRODUSED OF CARDINATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated and cores pertinent to this work.)  POH with tubing. Set RBP at 6065', had slight bleed off. Found leak below 4037'.	1. OIL G.	us t⊽⊓			7. UNIT AGREEMENT NAME
3. ADDRESS OF GERATOR  P. O. BOX 670, Hobbs, NM 88240  4. LIGATION DE WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  990 FNL & 990 FWL  14. PERMIT NO.  15. ELEVATIONS (Show whether DE, Rf, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Dots  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT  SHOOT OR ACIDIZE  ANARODO*  OTHER DOTE OF INTENTION TO:  THE WATER SHUT-OFF FRACTURE TREAT  SHOOT OR ACIDIZE  ANARODO*  CHANGE FLANS  (Other)  17. DUEN REFERENCE CASIN  REPAIR WELL  (Other)  18. WELL NO.  19. WELL NO.  10. FIELD AND FOOL, OR WILDCAT  Basin Dakota  11. SEC., T., E., M., OR BLE., AND  SUBSEQUENT OF ARISH  II. SEC., T., E., M., OR BLE., AND  12. COUNTY OR PARISH  NM  13. STATE  RIO Arriba  NM  16.  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Dots  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF THE PROPRIES	2. NAME OF OPERA	TOR			8. FARM OR LEASE NAME
P. O. Box 670, Hobbs, NM 88240  4. INCLIDIO OF WELL (Report location clearly and in accordance with any State requirements.*  At surface  990' FNL & 990' FWL  14. PERMIT NO.  15. ELEVATIONS (Show whether DE, RT, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASINO NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PRACTURE TREATMENT SHOOT OR ACIDIZE ABANDON'S SHOOTING OR ACIDIZE ABANDON'S SHOOTING OR ACIDIZING (Other) Report results of multiple completion of WATER SHUT-OFF REPORT OF THE SHOOTING OR ACIDIZED ABANDON'S SHOOTING OR ACIDIZING (Other) Report results of multiple completion of Recompletion or Recompletion Report and Log for Mal.)  17. DESCRIBE PROPOSED OR COMPLETED OF ERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated afte of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for nil markers and zones pertinent to this work.)*	Gulf Oi	L Corporation	Apache Federal		
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Basin Dakota  11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA  Sec 18-24N-5W  14. PERMIT NO.  15. ELEVATIONS (Show whether DE, RT, GR, etc.)  6459 GL  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PERDEDSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated after 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.)  POH with tubing. Set RBP at 6065, had slight bleed off. Found leak below 4037.	4. LOCATION OF WE	cht (Report location cl	early and in accordance with an	y State requirements.	l
990' FNL & 990' FWL  11. SPC, T., R., M., OR BLE. AND SUBVET OR AREA  12. COUNTY OR PARISH 13. STATE 6459' GL  13. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Dois  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE SHOOT OR ACIDIZING OTHER WELL (Other)  14. PERMIT NO.  15. ELEVATIONS (Show whether DE, RT, CR, etc.)  16.  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Dois  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF  RETARBAL 13. STATE RETARBAL 13. STATE RETARBAL 13. STATE RETARBAL 14.  NM  16.  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Dois  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF  RETARBAL 13. STATE RETARBAL		17 below.)	** .		Basin Dakota
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(Other)  CHANGE PLANS  (Other)  Relieved pres on csg sapulus X  (Note: Report results of multiple completion of Well Completion or Recompletion Report and Log for A.)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated after 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.)  POH with tubing. Set RBP at 6065, had slight bleed off. Found leak below 4037.	TEST WATER S	HUT-OFF I	TION TO: PULL OR ALTER CASING	SUBSEQUE WATER SHUT-OFF	RETAYRENG FEL
(Other)  (Note: Report results of multiple completion of Well Completion or Recompletion Report and Log form.)  17. Describe proposed on Completed operations (Clearly state all pertinent details, and give pertinent dates, including estimated rate 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.)  POH with tubing. Set RBP at 6065, had slight bleed off. Found leak below 4037.		[]	<del></del>		
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	proposed wor	rk. II well is directio	RATIONS (Clearly state all pertine nally drilled, give subsurface loc	ont details, and give pertinent dates, ations and measured and true vertica	including estimated date of starting any il depths for all markers and zones perti-
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	POH with	h tubing. Se	t RRP at 60651, had	slight bleed off. Fo	ound leak below 4037'

187'-250'. Pumped 40 sacks Class "B" with 2% CaCl. Tag cement 3370', drill cement and cement retainer to 4428'; test casing 550#. Circulate clean. Tag fill at 6608'. Ran 2-3/8" tubing, packer and SN; land tubing at 6524, packer at 6366. Pumped fresh water with biocide and oxygen scavenger down casing; test casing 250#. Pumped 1000 gals 15% NEA, 1 bbl surfactant, displace with 30 bbls 2% KCL water. Open to E1 Paso 9:30 A.M., 3-2-81, 152 MCF/day, 5 bb1 cond, 2 BW pumped. Complete after repairing casing leak and circulating cement out 4½"-8-5/8" casing annulus and acidizing Dakota gas zone 3-8-81.

		1. <b>1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</b>
18. I hereby certify that the foregoing is true and correct SIGNED R.D. P. C.	TITLE Area Engineer	DATE 1 3-111-81
(This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE (28
	NMOCC	