

DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

(Other instructions on reverse side)

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-013492	
2. NAME OF OPERATOR Gulf Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Gila	
3. ADDRESS OF OPERATOR Box 670, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME West Bisti Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FN & WL, Section 20, 26-N, 13-W		8. FARM OR LEASE NAME	
14. PERMIT NO.		9. WELL NO. 110	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6527' GL		10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 20, 26-N, 13-W	
		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

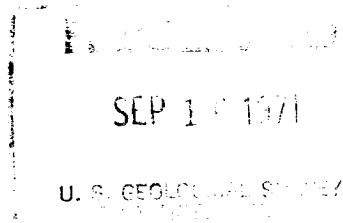
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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>Acidized</u>	
(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.) \*

5394' FB.

Pulled rods and pump. Pumped 1500 gallons of 15% HCL acid down tubing over 5-1/2" casing perforations 5340' to 5346'. Flushed with 24 barrels of water. Maximum pressure 700#. Injection rate 1.5 bpm. Swabbed and cleaned up. Ran rods and pump and returned well to production.



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

SIGNED Orig signed by C. R. Korzekwa

TITLE Petroleum Engineer

DATE September 14, 1971

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

PRINTED NAME OF APPROVING OFFICE:

\*See Instructions on Reverse Side