

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. Noo-C-14-20-7464
2. NAME OF OPERATOR GULF OIL CORPORATION	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P.O. Box 670, Hobbs, NM 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FSL & 990' FWL	8. FARM OR LEASE NAME Navajo "LB"
	9. WELL NO. 1
	10. FIELD AND POOL, OR WILDCAT WAW Fruitland Pic. Cliffs
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33-T26N-R12W
14. PERMIT NO.	12. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6130' GL	13. STATE NM

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) Ran production csg <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.)*

Reached TD @ 6:30A, 1-28-80 @ 1320'. Ran 30 jts & 1 cut jt 4½" OD K-55 10.5# ST&C csg (1305'); set @ 1315'. Cmt w/110 sx Halco Lite w/6½# Gilsonite & ½# flocele. Tailed in w/65 sx Class "B" 50-50 POZ w/0.5% CFR-2. PD @ 2:30A, 1-29-80 by Halco. Circ 25 sx cmt. WOC over 24 hours. Pres test csg to 2000# - OK.

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

SIGNED

M. B. Sikes Jr.

TITLE Area Engineer

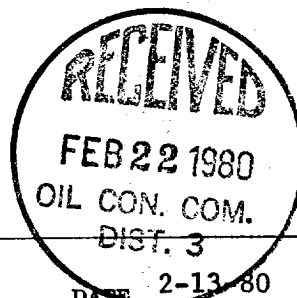
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

NMOCC



DATE 2-13-80

ACCEPTED FOR RECORD

DATE FEB 21 1980

FARMINGTON DISTRICT

BY *M. L. Luchessa*

*See Instructions on Reverse Side