	UNITED STATE	S SUBMIT IN TRIPLI	on re Budget Bureau No. 42-K14
DE	PARTMENT OF THE	INIERIUR verse side)	5. LEASE DESIGNATION AND SERIAL NO
	GEOLOGICAL SUF		6. IF INDIAN, ALLOTTEE OR TRIBE NAM
SUNDRY (Do not use this form use	NOTICES AND REPORT OF PROPERTY OF THE PROPERTY	ORTS ON WELLS n or plug back to a different reservoir. for such proposals.)	
	12. 1		7. UNIT AGREEMENT NAME
WELL GAS WELL	OTHER		- B
NAME OF OPERATOR	8. FARM OR LEASE NAME		
Oulf Oil Corpora	Pullerton Federal 9. WELL NO.		
Box 670, Hobbs,	6. Hann 50.		
LOCATION OF WELL (Report See also space 17 below.)	10. FIELD AND POOL, OR WILLIE.		
At surface			Kuts-Gallun
7200, NAT # 1900	' FKL, Section 14,	27-N, 11-W	11. SEC., T., R., M., OB BLK. AND SURVEY OR AREA
PERMIT NO.	15. ELEVATIONS (Show	whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
· · · · · · · · · · · · · · · · · · ·	61871	QL	San Juan Herri
Cl	neck Appropriate Box To In	dicate Nature of Notice, Repor	
	OF INTENTION TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	T ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZI	
REPAIR WELL (Other)	CHANGE PLANS		results of multiple completion on Well
DESCRIBE PROPOSED OR COMP	LETEL OPERATIONS (Clearly state a	Completion or I	Recompletion Report and Log form.
DESCRIBE PROPOSED OR COMP	LETEI OPERATIONS (Clearly state a is directionally drilled, give subsu	Completion or I	Recompletion Report and Log form:
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TITLE __

DATE __

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to:

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. State or Federal office for specific instructions.

fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is nequired by local Federal and/or State offices. conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-8852229

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G D. BURLAND

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	GEOLOGICAL SUr		
SUNDRY NO	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
(Do not use this form for pro Use "APPL			
Use "APPL	.CATION FOR PERMIT—" for such	proposals.)	
OIL			7. UNIT AGREEMENT NAME
WELL XX WELL OTFER 2. NAME OF OPERATOR	8. FARM OR LEASE NAME		
Gulf Oil Corporation 3. ADDRESS OF OPERATOR	Fullerton Federal 9. WELL NO.		
Box 670, Hobbs, New	8		
4. Location of Well (Report locatio See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT		
1500' FNL & 1800' FE	Kutz-Callup 11. sec., t., e., M., or blk. and survey or area		
			0 31 00 17 33 17
14. PERMIT NO.	15. ELEVATIONS (Show whether I	0F, R7, GR, etc.)	Sec 11, 27-N, 11-W 12. COUNTY OR PARISH 13. STATE
	61871 GT	, , , , , , , , , , , , , , , , , , , ,	
			San Juan New Mexico
16. Check	Appropriate Box To Indicate l	Nature of Notice, Report, o	r Other Data
NOTICE OF INT	ENTION TO:	SUBS	EQUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) CI Repor	
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			OCT 1 1 1967 OIL CON. COM. DIST. 3
18. I hereby certify that the foregoing ORIGINAL SIGNED C. D. BORL (This space for Federal or State of	NED BY AND TITLE AT	es Production Manage	
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	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
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OIL GAS GAS WELL OT	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME Fullerton Federal		
. NAME OF OPERATOR			
Gulf Oil Corporati			
ADDRESS OF OPERATOR	9. WELL NO.		
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1500' FNL & 1800'	Kutz-Callup 11. sec., t., e., M., or blk. and survey or area		
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FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
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