

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

7-08803

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Douthit "A" Federal

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC. T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 35-27N-11W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

GULF OIL CORPORATION

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

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

1000' FNL & 1000' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

6439' 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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Surface Casing

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

TD 12 1/2" hole @ 2P, 4-11-80. POH, RU & ran 26 jts 8-5/8" 24# K-55 ST&C csg (780'), set @ 787'. Cmt w/400 sx "B" w/2% CaCl₂. Plug dn 5P, 4-11-80. Circ 50 sx. WOC 20 hrs. Tst BOP & csg to 1000#, ok. Drld float cmt & shoe. Drlg form 7-7/8" hole @ 1P, 4-12-80.

ACCEPTED FOR RECORD

APR 23 1980

FARMINGTON DISTRICT

BY *[Signature]*



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

SIGNED *[Signature]*

TITLE Area Drilling Superintendent

DATE 4-18-80

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side