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CITY SECTION	
SANITARY	
FILE	
U.S.G.S.	
LEAD OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-1732

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.

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
UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 27 TOWNSHIP 21S RANGE 36E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name
W. A. Ramsay (NCT-A)

9. Well No.
42

10. Field and Pool, or Wildcat
Eumont

15. Elevation (Show whether DF, RT, GR, etc.)
3564' GL

12. County
Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Equip to Pump <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

POH with tubing. GIH with MA, perf sub, SN, 2-3/8" tubing to 3887'. GIH with pump and rods. Hang well on. Set pumping unit. Pumped 13 BO, 3 BW, 60 MCF gas. Before, would not flow. Complete after equip to pump.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Jerry Sexton TITLE Area Engineer DATE 5-23-83

APPROVED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE MAY 25 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAY 24 1983
O.C.D.
HOBBBS OFFICE