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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-100
Supersedes 61d
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State Fee
5. State Oil & Gas Lease No.
E-1587

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name West Pearl Queen Unit
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name
3. Address of Operator Box 670, Hobbs, New Mexico	9. Well No. 29-11
4. Location of Well UNIT DEPTH K 1980 FEET FROM THE South LINE AND 1980 FEET FROM West LINE, SECTION 29 TOWNSHIP 19-S RANGE 35-E NMPM.	10. Field and Pool, or Wildcat Pearl Queen
15. Elevation (Show whether DF, RT, GR, etc.) 3760 GL	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK
TEMPORARILY ABANDON
PULL OR ALTER CASING
CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIAL WORK
COMMENCE DRILLING OPNS.
CASING TEST AND CEMENT JOB
OTHER
ALTERING CASING
PLUG AND ABANDONMENT

CO, perforated, acidized & frac treated

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.

5002' TD.

Cleaned out with sand pump to TD. Perforated 5-1/2" casing at 4798-4802' & 4938-4944' with 4 JHPT. Spotted 500 gallons of 15% NE acid over new perforations. Set 2 hours. Frac treated with 10,000 gallons of gelled water with 1/2 to 2# SFG. Flushed with 110 barrels of water. Max break down pressure 2100#, min treating pressure 1300#, ISIP 1900#, after 5 min 1300#. Ran tubing, rods and pump and returned well to production.

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

SIGNED _____ TITLE **Area Production Manager** DATE **March 16, 1965.**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: