

NEW MEXICO OIL CONSERVATION COMMISSION

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL NEW TO CREEP OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL C-101 FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER-

7. Unit Agreement Name

6. Form or Lease Name  
**B. V. Culp (NCT-B)**

9. Well No.  
**2**

10. Field and Pool, or Wildcat  
**Eunice-Monument**

2. Name of Operator  
**Gulf Oil Corporation**

3. Address of Operator  
**P. O. Box 670, Hobbs, NM 88240**

4. Location of Well  
UNIT LETTER **I** **1980** FEET FROM THE **South** LINE AND **660** FEET FROM  
THE **East** LINE, SECTION **31** TOWNSHIP **19-S** RANGE **37-E** N.M.P.M.

12. County  
**Lea**

15. Elevation (Show whether DF, RT, CR, etc.)  
**3576'**

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 <u>Acidized and Install pumping equip.</u> <input 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.

3901' TD.  
Pulled producing equipment. Ran treating equipment, acidized open hole 3794 to 3901 with 2000 gallons 15% NEA HCL acid. Flushed with 18 bbls 8.6 brine water. Max press 1700#, min press 700#, ISIP 0#.  
Pulled treating equipment. Ran 2-3/8" tubing, rods, pump.  
Installed pumping unit.  
Returned well to production.

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

SIGNED D. F. Berlin TITLE Area Engineer DATE 1-26-77

APPROVED BY John [unclear] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

RELEASED

JAN 20 1977

OIL CONSERVATION COMM.  
HOBBS, N. M.