

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL & GAS COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Form Approved
Budget Bureau No. 42-R1424

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—" for such proposals.)

| | | | |
|--|--|--|-----------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. LC 030187 | |
| 2. NAME OF OPERATOR Gulf Oil Corporation | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, NM 88240 | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL & 510' FWL | | 8. FARM OR LEASE NAME C. E. LaMunyon | |
| 14. PERMIT NO. | | 9. WELL NO. 20 | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3288' GL | | 10. FIELD AND TOOL, OR WILDCAT Teague Blinebry | |
| | | 11. SEC. T. R. M. OR B.L. AND SURVEY OR AREA Sec 22-T23S-R37E | |
| | | 12. COUNTY OR PARISH Lea | 13. STATE NM |

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

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) Repair Pressure <input checked="" type="checkbox"/> | |
| (Other) <input type="checkbox"/> | | (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.)

POH with production equipment. Set RBP at 3531', test 500#. Place sand on RBP. Perf 910' with (4) 1/2" JH 90°. Set cement retainer at 810', test tubing 2000#. Establish circulation. Pump 150 sacks Class "C" with 4% gel and 100 sacks Class "C" neat. Squeeze 1250#. Drill cement and cement retainer. Circulate sand off RBP and POH. RIH with production equipment. Pumped 1000 gals 15% NEFE. Complete after repairing pressure. No pressure on 5 1/2"-8-5/8" casing. Test after work, 8 BO, 2 BW, 69 MCF/D; before work, 2 BO, 2 BW, 69 MCF/D.

RECEIVED

MAR 17 1983

OIL & GAS
MINERALS SECTION
ROSWELL, NEW MEXICO

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

SIGNED W. J. [Signature] TITLE Area Engineer DATE 3-7-83

(This space for Federal Use) **ACCEPTED FOR RECORD**

APPROVED BY (ORIG. SGD.) DAVID R. GLASS DATE SEP 07 1983

CONDITIONS OF APPROVAL

RECEIVED

SEP 8 1983

G.C.D.
HOBBS OFFICE