STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [ ] Fee [X]

5. State Oil & Gas Lease No.

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator
Gulf Oil Corporation

8. Farm or Lease Name
H. T. Mattern (NCT-D)

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

9. Well No.
11

4. Location of Well
UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1650 FEET FROM THE West LINE, SECTION 6 TOWNSHIP 22S RANGE 37E NMPM.

10. Field and Pool, or Wildcat
Tubb & Drinkard

15. Elevation (Show whether DF, RT, GR, etc.)
3457' 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 [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER TA Tubb & Drinkard, Recomplete Blinebry [X]		OTHER [ ]	

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.

Obtain stabilized GOR test on the down-hole commingled Tubb & Drinkard zones. Pull rods and pump. Install 2" full opening crown valve on tubing. Close in well 24 hours. Run BHP with 100' gradient stops 5800'-6575'. POH with tubing. Set CIBP at 6000' to TA the down-hole commingled Tubb & Drinkard zones. Perf 5465-67', 5494-96', 5521-23', 5545-47', 5580-82', 5644-46' & 5680-82' with (2) ½" JHPF. Straddle acidize each zone with 200 gals 15% NEFE HCL. Frac with 2400 gals 15% NEFE HCL, 64,000 gals frac, (28) 7/8" RCNB's, 20/40 sand and rock salt with acid flakes. Swab and test. Run rods and pump.

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

SIGNED R L Pitts TITLE Area Engineer DATE 1-8-82

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: