Form 3160-5 10 00 00 00 00 00 00 00 00 00 00 00 00	-	Podest Pussen No. 1004, 0107
(November 1983)	(()ther instruct	ICATE* Budget Bureau No. 1004-0135 (Expires August 31, 1985
(Formerly 9–331)  DEPARTMINT OF THE INTERIOR verse aide)  BUREAU OF LAND MANAGEMENT		5. LEASE DESIGNATION AND SERIAL NO.
<del></del>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND F		
(Do not use this form for proposals to drill or to the "APPLICATION FOR PERM	T(or_mat_propters.)	
OIL S GAS OTHER	M. CLIVED	Spuare Jake
2. NAME OF OPERATOR	DFC 3 1 1384	8. FARM OR LEAGE HAME
Gulf Oil Corp.	52001	
S. ADDRESS OF OPERATOR	O. C. D.	9. WBLL NO.
P. O. Box 670, Hobbs, NM 88240 4. LOCATION OF WELL (Report location clearly and in accordance)	ARTESIA, OFFICE	10. FIRLD AND POOL OF WILDCAR
See also space 17 below.) At surface		10. FIBLE AND FOOL, OR WILDCAT
660' FSL +660' FW.	L	11. SEC., T., B., M., OR BLE, AMD SURVEY OR AREA
		Sec. 6-T175-R30F
<b>.</b>	Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 18. STATE
	676'GL	Eddy nm
16. Check Appropriate Box T	o Indicate Nature of Notice, Rep	ort, or Other Data (
NOTICE OF INTENTION TO:	1	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASE	ING WATER SHUT-OFF	REPAIRING WELL
PRACTURE TREAT MULTIPLE COMPLETE	PRACTURE TREATM	ENT ALTERING CASING
BHOOT OR ACIDIZE ABANDON*	SHOOTING OR ACID	IZING ABANDONMENT®
REPAIR WELL CHANGE PLANS (Other)	(Other)(Note: Repo	rt_results of multiple completion on Well
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly st	Completion o	r Recompletion Report and Log form.)
proposed work. If well is directionally drilled, give nent to this work.) *	subsurface locations and measured and to	we vertical depths for all markers and sones perti-
POHINTHA Trill out OIR	00 20101 1. 1	+ 1/1 1 1 1111
TONGLOG. Mac ou CIS	FW 2240. Fish E	suck they, Sagfill
in ON. Spot 79 su cont	from too to 24	25' Cut off Coa
1151 1 1 1 1		a. cur off cog
1100 from surf. spot	the following	plugo:
67 sy 1150'-975'		
166 sy 620'-surel		
Install dry hole mar	ker. Clean olle	211 100
Shows our face mur	seco. aux. · cee	er wee.
:		
8. I hereby certify that the foregoing is true and correct	( / -	
SIGNED Jam & SWW Col	FITTE AREA ENG	INEER DATE 12-6-84
(This space for Federal or State office use)		
APPROVED BY		DATE 12 28 84
CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE / 200/