

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Gas - Gas Dual | 5. LEASE DESIGNATION AND SERIAL NO. M-14768 |
| 2. NAME OF OPERATOR Gulf Oil Corporation | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR Box 670, Hobbs, N.M. 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' FNL 1980' FWL Section 10-21S-27E | 8. FARM OR LEASE NAME Cerf Federal |
| | 9. WELL NO. 1 |
| | 10. FIELD AND POOL, OR WILDCAT Burton Flat Strawn & Morrow |
| | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10-21S-27E |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3217' GL |
| | 12. COUNTY OR PARISH Eddy |
| | 13. STATE N.M. |

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"/> | FULL 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) Closed In | |
| (Other) | | (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.)*

Both zones are presently closed in. Will return both zones to production upon receipt of FPC approval.

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

SIGNED D. F. Berlin TITLE Area Engineer DATE 6-3-76

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE AREA ENGINEER DATE 6-3-76

APPROVED BY
T. L. BEEKHUIS
ACTING DISTRICT ENGINEER

UNLESS FOR
BE PUT TO
APRIL 1 - 1976

*See Instructions on Reverse Side

RECEIVED
JUN 14 1976
RECEIVED
JUN - 7 1976
U. S. GEOLOGICAL SURVEY
ARTESIAN, NEW MEXICO