Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-14768

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.
OIL WELL ☐   GAS WELL ☒   OTHER Gas-Gas Dual

RECEIVED
OCT 3 0 1974
G. S. C.
ARTESIA OFFICE

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR

Gulf Oil Corporation

8. FARM OR LEASE NAME

Cerf Federal

3. ADDRESS OF OPERATOR

Box 670, Hobbs, N.M. 88240

9. WELL NO.

1

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

10. FIELD AND POOL, OR WILDCAT

Burton Flat Strawn

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   13. STATE

Eddy   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	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL ☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING ☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT* ☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Returned to production		☐
(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.)*

Temporary contract obtained and Transwestern Pipeline Corporation commenced purchasing gas 10-23-74.

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

SIGNED _____   TITLE Area Engineer   DATE 10-24-74

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side