STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED BY
MAY 03 1984
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]
5. State Oil & Gas Lease No.: K-6527

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 [ ] GAS WELL [X] OTHER-
7. Unit Agreement Name:
2. Name of Operator: Gulf Oil Corp. ✓
8. Farm or Lease Name: Eddy "FV" State Com
3. Address of Operator: P. O. Box 670, Hobbs, NM 88240
9. Well No.: 1
4. Location of Well: UNIT LETTER H, 1980 FEET FROM THE North LINE AND 990 FEET FROM THE East LINE, SECTION 25 TOWNSHIP 20S RANGE 27E NMPM.
10. Field and Pool, or Wildcat: Wildcat Avalon Atoka
15. Elevation (Show whether DF, RT, GR, etc.): 3352' GL
12. County: Eddy

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	[ ]			OTHER F+A Burton Flat Morrow & Recomplete Avalon Atoka			[X]

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.

POH w/tbg. Set CIBP @ 11,000'. Test 2000 psi-ok. Cap CIBP w/35' Cmt. Perf 10,432-36', 10,498-502', 10,694-98', 10,754-58', 10,794-98', 10,851-55' w/2 1/2" JHPF. Acz w/8000 gals 15% NEFE HCL. Max press 8000#, ISIP 5200, AIR 4.9BPM. Well C1 pending hookup.

Post FD-2
5-4-84
mer.
P+H

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

SIGNED R. L. Pate TITLE AREA ENGINEER DATE 5-1-84

APPROVED BY Original Signed By Leslie A. Clements TITLE Supervisor District II DATE MAY 04 1984

CONDITIONS OF APPROVAL, IF ANY: