

**N.M. O&G. COPY**  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

NM-0559177

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Gulf Oil Corporation /

AUG 11 1981

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

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

9. WELL NO.

1

10. FIELD AND FOOT, OR WILDCAT

Wildcat  
Under Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 8-T21S-R25E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3415' GL

12. COUNTY OR PARISH

Eddy

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(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.) \*

POH with production equipment. Set CIBP at 2400'. Circulate hole with abandonment mud, cap CIBP with 25 sacks Class "C" neat cement. Test casing 500#. Cut off surface wellhead equipment; weld plate between 13-3/8"-5 1/2" casing. Set 25 sack Class "C" neat cement surface plug 250'. Install dry hole marker. Clear and clean location.

Above plugs were discussed with Peter Chester 8-5-81.

**APPROVED**  
(Orig. Sgd.) PETER W. CHESTER  
  
AUG 11 1981  
  
FOR  
JAMES A. GILLHAM  
DISTRICT SUPERVISOR

AUG 7 1981

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

SIGNED

*P. P. Pate*

TITLE

Area Engineer

DATE

8-5-81

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE