

N.M.O.O.D. COPY

C/SF

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT 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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-330
2. NAME OF OPERATOR Gulf Oil Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, NM 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 1650' ENL & 1980' FEL	8. FARM OR LEASE NAME Franklin et al Federal
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3973' GL	10. FIELD AND POOL, OR WILDCAT Strawn
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 9-T25S-R24E
	12. COUNTY OR PARISH Eddy
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) P&A Atoka, Attemp Workover	X

(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 9240' & cap with 35' cement. Test plug to 1000#, held. Perf 8439'-69' with (1) 1/2" burrless o-phase decentralized JHPF (31 holes). Spot 10% double inhibited HCL 8469'-8380', displace excess acid; broke down perf 4700# back to 3600# 1 BPM. ISIP 3000#, 15 min 2800#. Swabbed. Treat perfs 8439'-69' with 5000 gals 15% NEFE HCL slick acid & (30) 7/8" RCNB's. ISIP 2900#, 5 min 2600#, 10 min 2500#, 15 min 2400#. Swabbed. Complete after P&A Atoka & unsuccessful workover in Strawn 10-27-80.

ACCEPTED FOR RECORD

NOV 5 1980

U.S. GEOLOGICAL SURVEY
ROSWell, NEW MEXICORECEIVED
NOV 4 1980
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE

Area Engineer

DATE

11-3-80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE