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NEW MEXICO OIL CONSERVATION COMMISSION

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MAY 18 1978

Form C-103
Supersedes OIA
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS **ARTESIA OFFICE**

OIL WELL ☐ GAS WELL ☒ OTHER ☐

Name of Operator

GULF OIL CORPORATION

Address of Operator

P. O. Box 670, Hobbs, NM 88240

Location of Well

UNIT LETTER K, 1980 FEET FROM THE South LINE AND 1980 FEET FROM

THE West LINE, SECTION 16 TOWNSHIP 23-S RANGE 27-E NMPM.

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

3142' GL

5a. Indicate Type of Lease

State ☒ Fee ☐

5. State Oil & Gas Lease No.

L-187

7. Unit Agreement Name

8. Form or Lease Name

Eddy "GF" State

9. Well No.

2

10. Field and Pool, or Wildcat

Under S. Carlsbad Morro

12. County

Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

WELL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

REMEDIATION WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOBS ☒

OTHER ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

Reached TD of 7 7/8" hole at 8:00 PM 3-24-78 at 12,297'. Ran 69 jts (2838') 5 1/2" N-80 17# LT & C, 142 jts (5854') 5 1/2" 17# K-55 LT & C and 82 and 1 cut jt (3577') 5 1/2" N-80 17# LT & C, total 12,269' set at 12,297'. Cement with 1450 sacks Class H cmt, 3/4 of 1% CFR-2 and 5# KCL per sack. Cement did not circulate. WOC 6 hours. TSITOC 7920'. WOC over 24 hours. Piped valves above ground level on all casing strings, approved by Bill Grissett OCC, Artesia, NM.

Tested 5 1/2" Casing to 3000# for 30 min - OK. (4-29-78).

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

Signed N. P. Sikes, Jr.

TITLE Area Engineer

DATE 5-16-78

APPROVED BY W. A. Grissett

TITLE SUPERVISOR, DISTRICT II

DATE MAY 19 1978

ADDITIONS OF APPROVAL, IF ANY: