NM OIL CONS. COMMISCION

SHOOTING OR ACIDIZING

(Other) Correct Casing

Drawer DD

| (May 1963) | | UNITED STATES MENT OF THE INT GEOLOGICAL SURVE | ERIOR (Other Instruct | LICATE on re- | Form approv Rudget Burer 5. LEASE DESIGNATION LC 06 | AND SERIAL NO. |
|--|--|--|--------------------------|---------------|--|----------------|
| (Do not | SUNDRY NO | 6. IF INDIAN, ALLOTTEE OR TRIBE NAM | | | | |
| OIL WE'LL 2. NAME OF OF | GAS X OTHER | | MAY - 3 19 | 82 | 7. UNIT AGREEMENT NA White City Com Unit A FARM OR LEASE NAM | Penn Gas 1 |
| Gulf Oil 3. ADDRESS OF | Corporation OPERATOR | | O. C. D | | 9. WELL NO. | |
| P. O. BC 4. LOCATION OF See also space At surface | EX 670, Hobbs, Well (Report location of 17 below.) | NM 88240 clearly and in accordance with | ARTESIA, OFFIC | E | 2 10. FIELD AND POOL, O | R WILDCAT |
| | 1650' FSL 8 | 2 1650' FWL | | · | White City Per 11. SEC., T., B., M., OR E SURVEY OR AREA | BLE. AND |
| 14. PERMIT NO. 15. ELEVATIONS (Show whether Di | | | her DF, RT, GR, etc.) | | Sec 29-T24S-1 | R26E |
| | · · · · · · · · · · · · · · · · · · · | | 449' GL | | Eddy | NM |
| 16. | Check A | ppropriate Box To Indica | ite Nature of Notice, Ro | eport, or O | ther Data | |
| | NOTICE OF INTER | | | | NT REPORT OF: | • |
| TEST WATER | | PULL OR ALTER CASING MULTIPLE COMPLETE | WATER SHUT-OF | · | REPAIRING W | |

(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.).

Surface casing on Application to Drill should read:

CHANGE PLANS

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

24" hole; 20" casing; 94#, set at 300; 300 sx cement circ

ALTERING CASING

| S. I hereby ceatify that the foregoing is true and corr | ect | | | |
|---|---------|---------------|------|---------|
| SIGNED PAYPROVED | _ TITLE | Area Engineer | DATE | 4-20-82 |
| (This space for Federal Trace On CE H. ST | WARI | | | |
| APPROVED BY APR 2 7 1982 CONDITIONS OF ORPPROVAL, IF ANY: | _ TITLE | | DATE | |
| JAMES A. GILLHAM DISTRICT SUPERVISOR | | | | |

*See Instructions on Reverse Side