

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(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.)

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|---|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | 5. LEASE DESIGNATION AND SERIAL NO. NM-14124 |
| 2. NAME OF OPERATOR GULF OIL CORPORATION | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, New Mexico* 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 | 8. FARM OR LEASE NAME Marquardt Federal |
| 14. PERMIT NO. | 9. WELL NO. 1 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3326' GL | 10. FIELD AND POOL, OR WILDCAT White City Penn |
| | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 1, T-25S, R-26E |
| | 12. COUNTY OR PARISH Eddy |
| | 13. STATE New Mexico |

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

NOTICE OF INTENTION TO:

| | |
|--|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL 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) <u>Ran & Cemented Intermediate</u> <input checked="" type="checkbox"/> | Csg |

(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.)*

Reached TD (9720') of 8-3/4" hole @ 5:00 p.m., 1-13-79. Ran 46 joints (2031') of 7" 26# S-95 LT&C, 57 joints (6648') of 7" 26# N-80 LT&C and 23 joints and 1 cut joint (1025') of 7" 26# S-95 LT&C casing. Total of 9704'. Set at 9720' with float collar at 9633' and DV tool at 5697'. Cemented with 500 sacks of Class "H" with 0.5% CFR-2 and 1/4# Flocele. Plug down complete at 6:30 a.m., 1-19-79. Temperature survey indicated top of cement at 7630'. Wait on cement for 18 hours.

Tested 7" casing with 4000# pressure for 30 minutes, 1-22-79; held o.k.

Running of 7" casing pursuant to verbal approval by James Knauff of United States Geological Survey.

Began drilling formation (6-1/8" hole) at 4:00 p.m., 1-22-79.

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

SIGNED N. B. Sikes, Jr. TITLE Area Engineer DATE 01-23-79
(This space for Federal or State office use)
APPROVED BY James Knauff TITLE ACTING DISTRICT ENGINEER DATE JAN 26 1979
CONDITIONS OF APPROVAL, IF ANY: