

NM OIL CONS. COMMISSION
DRAWER DD
UNITED STATES, NM 88210
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424
5. LEASE DESIGNATION AND SERIAL NO.
NM 14124
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" (other instructions on reverse side))

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐
2. NAME OF OPERATOR
Gulf Oil Corporation
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

JAN 25 1983

O. C. D.
ARTESIA, OFFICE

7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Marquardt Federal
9. WELL NO.
3
10. FIELD AND FOOT, OR WILDCAT
White City Penn
11. SEC. T. R. M. OR BLK. AND SURVEY OR AREA
Sec 12-T25S-R26E
12. COUNTY OR PARISH
Eddy
13. STATE
NM

1650' FSL & 1650' FWL

14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3297' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) Casing ☒
REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☒

(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.)

TD 1800' at 9:30 A.M., 12-29-82. RU & ran 41 joints 10-3/4" 40.5# K-55 ST&C, set at 1799'. Cemented with 1550 sacks Class "C" with 4% gel. Tail in with 300 sacks Class "C" neat with CaCl₂. Plug down 9:30 P.M., 12-29-82. Circulate cement to surface. WOC 18 hours. Test casing 1000#, ok.

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

SIGNED *David R. Glass*

TITLE Area Drilling Superintendent

DATE 1-17-83

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY

DATE

JAN 21 1983

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side