SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to despion or plus nack to a different reservoir. I. OIL Use "APPLICATION FOR PERMIT—" for such proposals.) 7. UNIT AGREEMENT NAME 7. UNIT AGREEMENT NAME THE OTHER 3. ADDRESS OF OPERATOR Gulf Oil Corporation 7. UNIT AGREEMENT NAME Fullerton Federa P. O. Box 670. Hobbs. NM 88240 1. LOCATION OF WELL (Report location clearly and in accordance with any State (or Angeles and Carles) and Carles and Car				
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to dempen or plug nack to a different reservoir. I. OIL WE'LL STIFF WE'LL OTHER 2. NAME OF OPERATOR Gulf Oil Corporation 3. ADDRESS OF OPERATOR 4. LOUATION OF WELL (Report location clearly and in accordance with any Size (and of the sun o		DEPARTMENT OF THE IN	ITERIOR (Other Instructions on re-	5. LEASE DESIGNATION AND SERIAL NO.
OIL WELL X OTHER 7. UNIT AGREEMENT NAME 8. FARM OF GEAST NAME Fullerton Federa 9. WELL NO. 11. See also space 17 below.) At surface 1650' FNL & 990' FWL		SUNDRY NOTICES AND REPORT OF THE PROPERTY OF T	RTS ON WELLS or plus nack to a different reservoir. or such proposals.)	0. IF INDIAN, ALLOTTER OR TRIBE NAME
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 Corporation of Well. (Report location clearly and in accordance with any State Corporation of Well. NO. 11. See also space 17 below.) At surface Basin Dakota 11. SEC. T. S. M. OR ALE AND	ME.Tr C	WELL A OTHER		7. UNIT AGREEMENT NAME
P. O. Box 670. Hobbs. NM 88240 1. See also space 17 below.) 1. Sec. T. S. M. O. B. L. C.	Gulf Oil	Oil Corporation		G. Fand on Grass name Fullerton Federal
	See also space	1650 FNL & 990 FWL	RECEIVE 9 1933	11 10. FIGURAND FOOL, OR WILDCAT Basin Dakota 11. SEC. T. B. M. OR BLE. AND
6247' GL U. S. ARMINGT		0. 15. ELEVATIONS (Show who	CL U. S. GEOLOGICAL SURVEY	San Juan NM
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT BIGOT OR ACIDIZE BEPAIR WELL Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: WATER SHUT-OFF FRACTURE TREATMENT ALTERING CASING ABANDONMENT*	TEST WATER S	TER SHUT-OFF PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING WELL ALTERING CASING

(Nore: 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.).

(Other) Repair Leak

POH with tubing. Found hole in tubing. Set RBP at 5594', test tubing 4000#. Load casing with FW, test 1000#-30 min, ok. POH with RBP and tubing. On line 3:30 P.M., 5-14-83. FNG.

CHANGE PLANS



18. I hereby certify that the foregoing is true and correct	et .	
SIGNED While	TITLE Area Engineer	DATE6-6-83
(This space for Federal or State office use)		
CONDITIONS OF APPROVAL, IF ANY: JUN 0 1983	TITLE	DATE

REPAIR WELL

(Other)