

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 7-08803 SF 078092	
2. NAME OF OPERATOR Gulf Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, NM 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 Douthit "A" Federal	
1000' FNL & 1000' FWL		9. WELL NO. 4	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6439' GL		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 35-T27N-R11W	
		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

18. 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) Perf, Frac	X

(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.)

Perf 4½" casing 6626-36' with (2) ½" JHPF & 6604-09' with (4) ½" JHPF (40 holes). Frac down 4½" casing with 36,000 gal x-linked gelled KCL water, 64,750# 20/40 sand, 10,000# 10/20 sand & (60) 7/8" RCNB's. Flush casing to perf with gelled pad. AIR 25 BPM at 2600#, ISIP 1560#, 15 min 910#. Clean out frac balls & frac sand 6630-77'. Ran packer, SN, 2-3/8" tubing, set packer at 6562', tail pipe at 6585', SN at 6522'. Swabbed. Complete after drilling, perfg, azidizing & fracing. Well closed in pending gas line connection.



ACCEPTED FOR RECORD

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

SIGNED *R. D. Pate* TITLE Area Engineer DATE 8-21-80

(This space for Federal or State office use)

FARMINGTON DISTRICT

APPROVED BY *[Signature]* TITLE NMOCC DATE

CONDITIONS OF APPROVAL, IF ANY: