

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

SF-078092

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.)

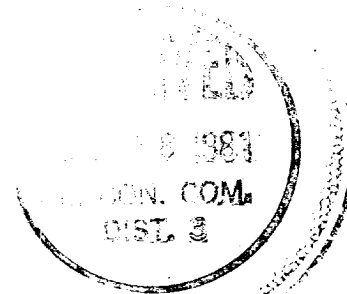
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Gulf Oil Corporation		8. FARM OR LEASE NAME Douthitt "C" Federal
3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, NM 88240		9. WELL NO. 1E
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1850' FSL & 1850' FEL		10. FIELD AND POOL, OR WILDCAT Basin Dakota
14. PERMIT NO.	15. ELEVATIONS (Show whether br. wt. or elev.) 6372' GL	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34-T27N-R11W
		12. COUNTY OR PARISH San Juan
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Perfd, Aczd, Fracd</u>	<input checked="" type="checkbox"/>
(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.)*

Clean location, fill cellar, drill DV tool at 4600'. Perf 6454'-6480' with (1) 1/2" JHPF & 6508'-6512' with (2) 1/2" JHPF. Spot 15% NEFE 6512'-6400'. Acidize with 4000 gals 15% NEFE slick and (72) 7/8" RCNB's. ISIP 300#, vac 7 min. Frac with 38,000 gals 1% KCL FW x-link, 72,000# 10/20 sand and (20) 7/8" RCNB's. ISIP 1100#, 5 min 800#, 10 min 650#. Complete after drilling, perfring, acidizing and fracing 9-3-81.



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

SIGNED R.D. Pith TITLE Area Engineer DATE 9-11-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side