

MOCC COPY
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.)

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR Gulf Oil Corporation</p> <p>3. ADDRESS OF OPERATOR Box 670, Hobbs, N.M. 88240</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirement. See also space 17 below.) At surface 660' FS&WL</p>		<p style="text-align: center; font-size: 1.5em;">RECEIVED</p> <p style="text-align: center; font-size: 1.2em;">JUN - 8 1978</p> <p style="text-align: center;">O. C. C.</p> <p style="text-align: center;">ARTESIA, OFFICE</p>	
<p>14. PERMIT NO.</p>		<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3676' GL</p>	
<p>5. LEASE DESIGNATION AND SERIAL NO. LC-056551A</p>		<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p>	
<p>7. UNIT AGREEMENT NAME</p>		<p>8. FARM OR LEASE NAME Holder "CB" Federal (NCT-B)</p>	
<p>9. WELL NO. 3</p>		<p>10. FIELD AND POOL, OR WILDCAT Grayburg Jackson</p>	
<p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 9-17S-30E</p>		<p>12. COUNTY OR PARISH Eddy</p>	
<p>13. STATE N.M.</p>			

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input checked="" 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 checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input 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.) *

3600' TD. 3510' PB. Pulled producing equipment. Set CIBP at 3001', cement retainer at 2899'. Pumped 75 sacks cement below retainer squeezing perforations 2922-62'. Spotted 25 sacks cement on retainer plugging back to 2738'. Perforated 2198-2200', 2246-48', 2291-93', 2457-59' with 2, 1/2" JHPF. Pumped 600 gallons 15% NEHCL acid per set. Frac treated new perforations with 28,000 gallons gelled water containing 21,000# 20-40 sand. Swabbed and cleaned up, ran producing equipment and tested well. No commercial production obtained. Well closed in 3-28-78 uneconomical to produce.

RECEIVED
JUN 2 1978
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED <u><i>Russell Worley</i></u>	TITLE <u>Area Engineer</u>	DATE <u>6-1-78</u>
(This space for Federal or State office use)		
APPROVED BY <u><i>Albert P. Hall</i></u>	TITLE <u>ACTING DISTRICT ENGINEER</u>	DATE <u>JUN 07 1978</u>
CONDITIONS OF APPROVAL, IF ANY:		