

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87503

Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

O. C. D.  
ARTESIA, OFFICE

5a. Indicate Type of Lease  
State  For

5. State Oil & Gas Lease No.

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..." (FORM C-101) FOR SUCH PROPOSALS.)

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  
UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 18 TOWNSHIP 18S RANGE 27E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name  
Feather Com

9. Well No.  
1

10. Field and Pool, or Wildcat  
Red Lake Penn

15. Elevation (Show whether DF, RT, GR, etc.)  
3282' GL

12. County  
Eddy

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Add Perfs and Acidize</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

POH with tubing. Set CIBP at 9150', test 1000#. Perf 8940-44', 8972-76', 8988-92', 9042-46', 9070-74', 9098-9102' with (2) 1/2" JHPF. Spot 15% HCL 9102'-8940'. Acidize with 6000 gals 15% HCL, (60) RCNB's. AIR 5.8 BPM, avg pres 4400#, ISIP 3700#. Flowed approx 18 MCF gas in 24 hours. Complete after unsuccessful reconditioning of Morrow-Atoka 1-31-83.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Area Engineer DATE 2-3-83

APPROVED BY \_\_\_\_\_ TITLE Original Signed By Leslie A. Clements Supervisor District II DATE FEB 07 1983

CONDITIONS OF APPROVAL, IF ANY: