NM OIL CONS. COMMISSION Drawer DD

Drawer DD

01564

st file

Form 9-331 (May 1963)	UNITED S	TATES	Tresta' NW PASTA	Form		
(May 1903)	EPARTMENT OF	THE INTE	SUBMIT IN TRIPLIC (Other instructions	on re- Budget Kure	rau No. 42-R1424	
		5. LEASE DESIGNATION AND BERIAL NO.				
SUNDRY NOTICES AND REPORTS ON WELLS				6. IF INDIAN ALLOTTE	LC 065457 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
Do not use this form	I NONCES AND for proposals to drill or (REPORTS	ON WELLS E back to a different reservoir. Proposals.) RECEIVED	water, account	E OR THINE NAME	
Us	e "APPLICATION FOR PEI	MIT- for such	Proposals.) RECEIVED			
OIL CAS C	. 🗸		THE LIVE	White City	AME Coo	
2. NAME OF OPERATOR	OTHER "			Com Unit	renn Gas 1	
Gulf Oil Corpo	ration		JUN 3 0 1982	8. FARM OR LEASE NA		
3. ADDRESS OF OPERATOR	Tacton					
P. O. Box 670,	Hobbs, NM 882	άn	O. C. D.	9. WELL NO.		
4. LOCATION OF WELL (Repor	t location clearly and in ac-	cordance with a	ARTESIA, OFFICE	2		
See also space 17 below.) At surface				l .	White City Penn Morrow	
1650' FSL & 1650' FWL			•	11. SEC., T., B., M., OR BLE, AND		
			•	SURVEY OR ARE.	A A	
				Sec 29-T24S-I	R26E	
14. PERMIT NO.	15. ELEVATION	s (Show whether	•	12. COUNTY OR PARISI	H 13. STATE	
	<u> </u>	3449' (GL .	Eddy	NM	
16.	Check Appropriate Bo	x To Indicate	Nature of Notice, Report	or Other Dete	······································	
NOTIC	E OF INTENTION TO:		1			
TEST WATER SHUT-OFF		· —	S	UBSEQUENT REPORT OF:		
FRACTURE TREAT	PULL OR ALTER O	<u> </u>	WATER SHUT-OFF	REPAIRING	WELL	
SHOOT OR ACIDIZE	MULTIPLE COMPL. ABANDON®	.ETE	FRACTURE TREATMENT	ADIERING C	ASING	
REPAIR WELL	CHANGE PLANS		SHOOTING OR ACIDIZIN			
(Other)			(Nors : Report	Proposed Depth results of multiple completion	on Well	
17. DESCRIBE PROPOSED OR COM	PLETED OPERATIONS (Clearly	r State all pertin	cut details, and give pertinent cations and measured and true	ecompletion Report and Log fo	rm.)	
The above wel	l will be drille	d to appro	oximately 11,650' i	nstead of 11,500'.		
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				'		
			DE	引起が行星 加 un 2 8 1982 加		
	•			011 13 0 1002		
			(_	OIL & GAS		
			U.S. ¹			
			ROS	WELL, NEW MEXICO		
18. I hereby certify that the f	orogofile to tour	 .				
W/ 1. 1	a correct	t				
SIGNED /// ADDO	CVICES -	TITLE	Area Engineer	DATE 6-2	25-82	
(This space for Federal or	State office use)					
APPROVED BY(Orig	Sed GEORGE H. S	TEWART				
CONDITIONS OF APPRO		TITLE		DATE		
1 3011 2	2 ⁴ 8 1982 x					

*See Instructions on Reverse Side

JAMES A. CILLHAM

DISTRICT SUPERVISOR