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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	E-5841

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name West Pearl Queen Unit
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name
3. Address of Operator Box 670, Hobbs, New Mexico	9. Well No. 33-60
4. Location of Well UNIT LETTER F , 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 33 TOWNSHIP 19-8 RANGE 35-E NMPM.	10. Field and Pool, or Wildcat Pearl Queen
15. Elevation (Show whether DF, RT, GR, etc.) 3702 GL	12. County Lea

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 checked="" 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"/>	

Drilled deeper, acidized & frac treated

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.

5016' TD.

Drilled deeper with 3-7/8" bit to 5016'. Dumped 250 gallons of 15% NE acid on bottom. Frac treated open hole interval with 5500 gallons of gelled water containing 1/2 to 1# SPG. Flushed with 20 barrels of water. Treating pressure 2900 to 3000#1 ISIP 1000#, after 5 min 800#. AIR 0.2 bpm. Ran tubing, rods and pump and returned well to production. Will convert well to water injection service later.

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

ORIGINAL SIGNED BY
SIGNED C. D. BORLANI TITLE Area Production Manager DATE April 6, 1965

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: