STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	<u>L</u>	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR	L.	

OIL CONSERVATION DIVISION

DISTRIBUTION	P	O, BOX 2088	,		Form C-103	
SANTAFE	-1	NEW MEXICO	8750 t	Revised 19-1-78		
FILE]		••••	Sa. Indicate Type of	Lease .	
U.S.O.S.				State X	Fee	
LAND OFFICE]			5. State Otl & Gas L		
OPERATOR	لـ			B-246-1	edse 140.	
				71111111111	mmm	
SUNDF	RY NOTICES AND REPOR	RTS ON WELLS	CREUT RESERVAIR			
(DO HOT USE THIS FORM FOR PR	TION FOR PERMIT -" (FORM C-10)	FOR SUCH PROPOSALS.)		mmi.	
1.				7. Unit Agreement No	ıme	
MELL WELL X	OTHER-					
2. Name of Operator				6. Form or Lease Na	me -	
GULF OIL CORPORATION				F. W. Kutter (NCT-E)		
3. Address of Operator				9. Well No.		
P O Box 670, Hobbs	s. NM 88240			1		
P.O. Box 670, Hobbs, NM 88240				10. Field and Pool, or Wildcat		
UNIT LETTER K 1	1980 S	outh	1980	Eumont Gas		
UNIT LETTER	FEET FROM THE	LINE AND _	FEET FROM	mmm	THITTI	
	0	199	37E			
THE West LINE, SECT	ION TOWNSHIP_	RANGE	J/E NMPM.			
m	15. Elevation (Show	whether DE PT CP	etc.)	12. County	444444	
	15. Elevation (Show	3675' GL	e.c.,	Lea		
		7612 GT		1 1200	77777777	
16. Check	Appropriate Box To Ind	icate Nature of N	lotice, Report or Otl	ner Data		
	INTENTION TO:	1		REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ASAN	DON AEMEDIAL W	ORK	ALTERING	CASING	
		1	ORILLING OPHS.	PLUG AND	ABANDONMENT	
TEMPORARILY ABAHOON	CHANGE PLANS	 -1	T AND CEMENT JOS			
PULL OR ALTER CASING	PHONEL PENNS		* *			
Recondition & per	rf higher in Fumont					
OTHER RECORDITION & PER	II HIGHEL III DOMONIO	— =				
17. Describs Proposed or Completed C	Derations (Clearly state all per	inent details, and give	pertinent dates, including	estimated date of star	ting any proposed	
work) SEE RULE 1103.						
	bg. Set CIBP @ 3680	11 (000 11/351	emt Tost eso	to 500 msi. P	erforate	
3900' TD. POH w/ti	bg. Set CIBP @ 3000) & Cap w/33	5. 17!/(2) by h	urrless zeros	nhased	
Eumont intervals 3:	510-12'; 3556-58'; 3)	J-1/ W/(2) 2 D	al 15% NEEF in	hihited	
decentralized JHPF	(16 holes). Acidiz	e ii necessar	y W/3200 gai sii	ich if nocossa	HIIDICCO	
HCl acid and (12)	7/8" RCNBs. Swab &	test well. F	ollow with frac	Jon II Hecessa	ıry.	
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10. I hereby certify that the informatio	n above is true and complete to	the best of my knowled	ige and belief.			
	0.					
$\mathcal{U}.(\mathcal{X},\mathcal{X}_{\bullet})$	Kes Js. "	ru Area Engi	neer	DATE 11-7	- 79	
e IENED	70					
Oria	g. Signed by			B1014	0.1070	
	v Sexton	T1 #		_ BAYE NOV	9 1979	
Dist.	L Supv.	TLE	<u> </u>			
CONDITIONS OF APPROVAL, IF AN	¥1					