

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

AUG 11 1 50 PM '69

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation		8. Farm or Lease Name Burice King
3. Address of Operator Box 670, Hobbs, New Mexico		9. Well No. 25
4. Location of Well UNIT LETTER D 990 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE, SECTION 28 TOWNSHIP 21-S RANGE 37-E NMPM.		10. Field and Pool, or Wildcat Blinchry
15. Elevation (Show whether DF, RT, GR, etc.) 3460' GL		12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

Acidized

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.

7092' PB.

Treated 7" casing perforations 5937-39' with 1000 gallons of 28% HCL double inhibited acid with 1 gallon of demulsifier and 1000 gallons of mod brine down tubing. Flushed with 30 barrels of oil. Treating pressure 150 - 200#, AIR 5.2 bpm, ISIP on vacuum. Treated 7" casing perforations 5898-5900' with 500 gallons of 28% HCL acid with 1/2 gallon demulsifier and 500 gallons of mod brine. Flushed with 30 barrels of oil. AIR 5.2 bpm, treating pressure 150 - 175#, ISIP vacuum. Treated 7" casing perforations 5830-32' with 500 gallons of 28% HCL acid with 1/2 gallon demulsifier and 500 gallons of mod brine. Flushed with 30 barrels of oil. AIR 5.2 bpm, treating pressure 100 - 950#, ISIP vacuum. Swabbed and cleaned up. Ran rods and pump and returned well to production.

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

ORIGINAL SIGNED BY
C. D. BORLAND

SIGNED _____

TITLE **Area Production Manager**

DATE **August 11, 1969**

APPROVED BY _____

TITLE **SUPERVISOR DISTRICT**

DATE _____

CONDITIONS OF APPROVAL, IF ANY: