NO. OF COPIES RECEIVED	<u> </u>	Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		E110C11A9 1-1-02
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Fee X
OPERATOR		5. State Oil & Gas Lease No.
SUND.	RY NOTICES AND REPORTS ON WELLS ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. RITION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
OIL XX GAS WELL XX	OTHER-	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Gulf Oil Corporation		J. N. Carson (NCT-C)
3. Address of Operator		9. Well No.
Box 670, Hobbs, New M	exico 88240	5
	910 Namel 000	10. Field and Pool, or Wildcat
UNIT LETTER,,,,,	810 FEET FROM THE North LINE AND 980 FEET FR	Paddock
THE East LINE, SECTI	ION 33 TOWNSHIP 31-S BANGE 37-E	
LINE, SECT	TOWNSHIP STED MANGE 37-E NMP	<i>~{ </i>
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3456' GL	
16. Check		Lea
NOTICE OF I	Appropriate Box To Indicate Nature of Notice, Report or O	
	SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR A TER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
_	OTHER _	[-7
OTHER		
	Cleaned out, perforate	d and acidized
 Describe Proposed or Completed Op- work) SEE RULE 1103. 	perations (Clearly state all pertinent details, and give pertinent dates, including	ng estimated date of starting any proposed
5383' PB, 7442' TD.		
Pulled producing	equipment. Cleaned out with 6-1/8" bit to 538	3'. Perforated additiona
raddock zone in /" cas	sing at $5226-36$ with 2. $1/2$ JHPF. Ran tubing	and nacker Treated new
berrorations with 5000	J gallons of 15% NE acid. Flushed with 24 harr	els of 9 2# bring water
Maximum pressure 2400%	f, minimum 1/00#, ISIP vacuum. AIR 5.7 RPM. S	wahhed and cleaned up
ruffed tubing and pack	cer. Ran 2-3/8" tubing and set at 5239' Ran	rode and numb and placed
well on production. W	Well is now producing thru perforations 5087' to	o 5236'.
		•
R I hereby contifer that the left-		
o. Thereby Certify that the information	above is true and complete to the best of my knowledge and belief.	-
% /1 /H -		
IGNED / / Y WILL	Aglale TITLE Area Engineer	August 16, 1973
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(
PPROVED BY		

CONDITIONS OF APPROVAL, IF ANY: