NO. OF COPIES RECEIVED   Supersedees Old     DISTRIBUTION   Supersedees Old     SANTA FE   NEW MEXICO OIL CONSERVATION COMMISSION   Effective 1-1-65     FILE   State   State     U.S.G.S.   State   Fee     COPERATOR   State   Fee     SUNDRY NOTICES AND REPORTS ON WELLS   State   Fee     (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.   7. Unit Agreement Name     1.   OIL   GAS   OTHER-     2. Name of Operator   OTHER-   8. Form or Lease Name     3. Address of Operator   S. Address of Operator   S. Well No.	]
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LAND OFFICE   5. State Oil & Gas Lease No.     OPERATOR   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	
OPERATOR   3. State Off & Gus Date Anterna     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	
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.)   7. Unit Agreement Name     1.   OIL SAS WELL   OTHER-   8. "Carm of Lease Name     2. Name of Operator   Barry Leonard (NCT-1)     3. Address of Operator   9. Well No.	
1. OIL GAS OTHER- 8. Farm or Lease Name   2. Name of Operator 8. Farm or Lease Name 8. Farm or Lease Name   Gulf Oil Corporation 9. Well No.   3. Address of Operator 9. Well No.	77.
1. OIL GAS OTHER- 8. Farm or Lease Name   2. Name of Operator 8. Farm or Lease Name 8. Farm or Lease Name   Gulf Oil Corporation 9. Well No.   3. Address of Operator 9. Well No.	$\square$
OIL XX GAS WELL OTHER- 8, Farm or Lease Name   2. Name of Operator 8, Farm or Lease Name   Gulf Oil Corporation 9, Well No.   3. Address of Operator 9, Well No.	
2. Name of Operator 8. Form or Lease Name   Gulf Oil Corporation 9. Well No.   3. Address of Operator 9. Well No.	
Oulf Oil Corporation Harry Leonard (RCI-)   3. Address of Operator 9. Well No.	-
3. Address of Operator	)
$1  \text{The track - Marcine R200} \qquad $	
Box 670, Hobbs, New Maxico 88240	
4. Location of Well Borth 330 crest man Loop 18 Montoya	
UNIT LETTER H 2310 FEET FROM THE North LINE AND 330 FEET FROM LOOP 15 HONTOVA	$\mathcal{T}$
<b>16 21-8 MARK</b>	11
THE RANGE INP. LINE, SECTION 16 TOWNSHIP 21-8 RANGE 37-8 MMPM.	$\overline{\eta}$
15. Elevation (Show whether DF, RT, GR, etc.) 12. County	11
	//
	1
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	H
TEMPORARILY ABANDON	L
PULL OR ALTER CASING	
	<b>[</b> 1
Actidised	

17, Describe Proposed or Completed Operations (Clearly state all pertinent details, work) SEE RULE 1103.

## 7375' PB.

Pulled rods, pump and tubing. Ran Baker Model R packer on 2-7/8" tubing and set at 7250' with 14,000% compression. Loaded tubing - casing annulus with brine water. Treated 5-1/2" casing perforations 7295' to 7333' with 3,000 gallons of 28% NE acid. Flushed with 45 barrels of brine water. Maximum pressure 2600%, minimum 1500%, AIR 5.25 bpm, ISIP 2100%, after 15 minutes 1900%. Swabbed and cleaned up. Fulled tubing and packer. Ran 2-7/8" tubing, 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	TITLE Area Production Manager	DATE
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE SUPERVISOR DISTRICT	DATE