| . OF COPIES RECEIVED  | 7                                                                                                                           | Form C -103                         |
|-----------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| DISTRIBUTION          |                                                                                                                             | Supersedes Old                      |
|                       | NEW MEXICO OIL CONSERVATION COMMISSION                                                                                      | C-102 and C-103<br>Effective 1-1-65 |
| SA' AFE               |                                                                                                                             | E116(1146 1-1-03                    |
| FILE                  | -                                                                                                                           | 5a. Indicate Type of Lease          |
| U.S.G.S.              | -                                                                                                                           | State Fee XX                        |
| LAND OFFICE           | -                                                                                                                           | 5, State Oil & Gas Lease No.        |
| OPERATOR              |                                                                                                                             | 3, Mare On G das Lease no.          |
| USE "APPLICA          | RY NOTICES AND REPORTS ON WELLS<br>ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.<br>TION FOR PERMIT | 7. Unit Agreement Name              |
| OIL GAS WELL WELL     | OTHER-                                                                                                                      |                                     |
| Name of Operator      |                                                                                                                             | 8, Farm or Lease Name               |
| Gulf Oil Corporatio   | Eubank                                                                                                                      |                                     |
| . Address of Operator |                                                                                                                             | 9. Well No.                         |
| Box 670, Hobbs, New   | 3                                                                                                                           |                                     |
| . Location of Well    |                                                                                                                             | 10. Field and Pool, or Wildcat      |
| UNIT LETTERG          | 1980 FEET FROM THE NOTTH LINE AND 2080 FE                                                                                   | ET FROM Blinebry Gas                |
| THE East LINE, SECT   | 10N 22 TOWNSHIP 21-S RANGE 37-E                                                                                             | _ МАРМ.                             |
|                       | 15. Elevation (Show whether DF, RT, GR, etc.)                                                                               | 12. County                          |
|                       | 3417' GL                                                                                                                    | Lea                                 |
| <sup>6</sup> . Check  | Appropriate Box To Indicate Nature of Notice, Report                                                                        | or Other Data                       |
|                       | ••••                                                                                                                        | QUENT REPORT OF:                    |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK                                                                                              | ALTERING CASING                     |
| TEMPORARILY ABANDON   | COMMENCE DRILLING OPNS.                                                                                                     | PLUG AND ABANDONMENT                |
| PULL OR ALTER CASING  | CHANGE PLANS CASING TEST AND CEMENT JQB                                                                                     |                                     |
| OTHER Recomplete in D | rinkard                                                                                                                     |                                     |

7. 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.

## 6620' TD.

Pull producing equipment. Seal Blinebry perforations 5733' to 5854' with 50 barrels of Temblok 30 gel. Drill out CI BP at 5900' and clean out to total depth at 6630'. Plub back with sand to approximately 6520', abandoning Drinkard open hole interval 6535' to 6620'. Perforate Drinkard zone in 7" casing in the approximate interval 6395' to 6510'. Run treating equipment and treat new perforations with 2,000 gallons of 15% N E acid and frac treat with 10,000 gallons of gel water and 25,000 gallons of gel water containing 1 to 2# SPG. Flush with 1950 gallons of gel water. Swab and clean up. Pull treating equipment. Run 2-3/8" tubing, packer and circulating valves. Set packer at approximately 6300' with 10,000# tension with bottom of tail pipe at approximately 6450', bottom CV at 6420' in closed position and upper CV at 6265' in open position. Swab Blinebry zone, Close upper CV, isolating Blinebry zone in tubing-casing annulus. Open lower CV. Swab and clean up and place Drinkard zone on production.

| 8. I hereby certify that the infe | ormation above is true and comple | ete to the best of my knowledge and belief. |                        |
|-----------------------------------|-----------------------------------|---------------------------------------------|------------------------|
|                                   | asking                            | TITLE Area Engineer                         | DATE September 9, 1974 |
|                                   | nad by<br>Jou D. Ramey            |                                             |                        |
| PPROVED BY                        | Dist. I, Supr.                    | TITLE                                       | DATE                   |