

Form 5-311
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

SUBMIT IN TRIPlicate
(Other instructions on re-
verse side)

Form approved
Budget Bureau No. 42-R1121

5. LEASE DESIGNATION AND SERIAL NO.

LC-033706-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

S. Penrose Skelly Unit

8. FARM OR LEASE NAME

9. WELL NO.

180

10. FIELD AND TOOL, OR WILDCAT

Eumont

11. SEC., T., R., M. OR ALK. AND
SURVEY OR AREA

Sec 8-T22S-R37E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

660' FSL & 660' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3415' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Pressure Test Casing

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-
nent to this work.)*

Set CIBP at 3400', test CIBP and casing 500#. If pressure does not hold, set
packer at 3350'. Test tubing 2000#. Test CIBP 500#. Pressure tubing-casing
annulus 500#. Locate and isolate all leaking intervals. POH with tubing and packer.

RECEIVED

JUN 2 1983

OIL & GAS

ROSWELL, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED

Peter W. Chester

TITLE

Area Engineer

DATE

5-27-83

(This space for Federal or State use only)

APPROVED

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

(Orig. Sgd) PETER W. CHESTER

TITLE

DATE

JUN 28 1983

*See Instructions on Reverse Side

RECEIVED

JUN 29 1983

**O.C.D.
HOBBS OFFICE**