Number 2013       UNITLS STATES DEPARTMENT OF THE INTERIOR       STRUCT IN TRUDUCATION (Generation and the state internation of the state internati		~		10 O. 🕊 🔿
SUNDRY NOTICES AND REPORTS ON WELLS         Uponot use this for proposals, of the other of proposals, of the other proprecevential proposals, of the other proprint p		DEPARTMENT OF THE INTER	SUBMIT IN TRIPLICA (Other instructions on re Verse side)	Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. LC-030187
0.1.       0.3.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.       0.7.1.				6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Guil Corporation       C. E. LaMunyon         3. ADDRESS OF OPERATOR       9. WELA NO.         Box 670, Hobbs, N.M. 88240       7         4. LOCATION WELL (Report location clearly and in accordance with any State requirements.' At wirdnee       10. FIELD AND NOL, OR WILCCAT         660' FSL 660' FWL Section 22-23S-37E       11. stc., r. R. M. OR BLEA AND SUBJECT ALEA         14. PERNIF NO.       15. ELEVATIONS (Show whether DF, RT, GR, etc.)         15. ELEVATIONS (Show whether DF, RT, GR, etc.)       12. COUNTY OF PARISH 13. STATE         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data         Nortice OF INTENTION TO:       Stepsequent Restore OF:         TEST WATER SHUT-OFF       FLL OR ALTER CASING         MULTIPLE COMPLETE       MULTIPLE CONFLEX         ABANDON'       MULTIPLE CONFLEX         Other)       ANATON'         Other)       MULTIPLE COMPLETE         IT, DESCRIPTIONE FROME ALL AND SUPPORT CONFLEXATIONS (Clearly state all perthement details, and give perturent details, and give perturent and schools' and long estimated date of starting any proposed work, if well is directionally drilled, sive subarface long and management and free perturent details, and give perturent details, and give perturent details for all markers and score perture recompleted and true vertical depletion or Recompletion Report and Log form.)         17. DESCRIPTIONE TRANSON OF CLEVENT SUPPORT ALL PERTURE ALL ALL PERTURE ALL PERTURE ALL ALL PERTURE ALL PERT	OIL GAS WE'L WELL	X OTHER		
4. DOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space if below.) At surface       10. FIELD AND POOL, OK WILPCAT         660' FSL 660' FWL Section 22-23S-37E       10. FIELD AND POOL, OK WILPCAT         14. PERNIT NO.       15. ELEVATIONS (Show whether DP, RT, GR, etc.)       11. SEC. T, E. M., OB BLE, AND SURVEY OK AREA         14. PERNIT NO.       15. ELEVATIONS (Show whether DP, RT, GR, etc.)       12. COUNTY OR PARISH       13. STATE         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data         NOTICE OF INTENTION TO:         SUBSEQUENT REPORT OF:         FRACTCRE TERAT         NOTICE OF INTENTION TO:         SUBSEQUENT REPORT OF:         PULL OR ALTER CASING         MULTIPLE COMPLETE       MULTIPLE COMPLETE         ANDAX*       MULTIPLE COMPLETE         SIGOT OR ACIDIZED       MULTIPLE COMPLETE         REFAR WELL       (Other)         OTHER TREAMENT         SUBSEQUENT REPORT OF:         REFARMENT MULTIPLE COMPLETE         NULL OR ALTER CASING         MULTIPLE COMPLETE       ALTERING CASING         MULTIPLE COMPLETE       ALTERING CASING         SUBSEQUENT REPORT OF:         <	Gulf Oil Cor			C. E. LaMunyon
14. PERMIT NO.       15. ELEVATIONS (Show whether DF, RT, GR, etc.)       12. COUNTY OR PARISH       13. STATE         3304' GL       Lea       N.M.         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data         SUBSEQUENT REPORT OF:         TEST WATER SHUT-OFF       PULL OR ALTER CASING       WATER SHUT-OFF       EEPAIRING WELL         NULTIPLE COMFLETE       MULTIPLE COMFLETE       ABANDON*       Check Plans       ALTERING CASING         (Other)       Other)       CHANGE PLANS       CHANGE PLANS       (Other/Abandon Teague Simpson & *       X         (Other)       Check If well is directionally drilled, give subsurface locations and meagured and true vertical depths for all markers and zones pertiment to this work.)*       "recomplete in No. Teague Devonian         7440' PB. Pulled producing equipment. Set CIBP at 8100', capped with 35' cement. Set       CIBP at 7450', capped with 10' cement abandoning Teague Simpson zone.       Perforated 7''         casing with 2, ½''' JHPF at 7398' and 7408'. Ran treating equipment, acidized perforations 7398' and 7408' with 6,000 gallons 15% NEFE slick acid. Average pressure 3350#. Average injection rate 6 bpm. ISIP 2000#, after 15 minutes 1600#. Swabbed and cleaned up.         Tested from North Teague Devonian zone. Well is shut in waiting on pipeline connection.	4. LOCATION OF WELL () See also space 17 bel At surface	Report location clearly and in accordance with any low.)	State requirements.*	North Teague Devonian 11. SEC., T., R., M., OB BLK. AND SUBVEY OR ABEA
<ul> <li>16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data</li> <li>NOTICE OF INTENTION TO:</li> <li>TEST WATER SHUT-OFF</li> <li>FRACTURE TREAT</li> <li>SHOOT OR ACIDIZE</li> <li>REPAIR WELL</li> <li>(Other)</li> <li>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 measure and muture vertical depths for all markers and zones pertinent to this work.)*</li> <li>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 of producing equipment. Set CIBP at 8100', capped with 35' cement. Set CIBP at 7450', capped with 10' cement abandoning Teague Simpson zone. Perforated 7'' casing with 2, ½'' JJHPF at 7398' and 7408'. Ran treating equipment, acidized perforations 7398' and 7408' with 6,000 gallons 15% NEFE slick acid. Average pressure 3350#. Average injection rate 6 bpm. ISIP 2000#, after 15 minutes 1600#. Swabbed and cleaned up. Tested from North Teague Devonian zone. Well is shut in waiting on pipeline connection.</li> </ul>	14. PERMIT NO.	15. ELEVATIONS (Show whether D	F, RT, GR, etc.)	
NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         TEST WATER SHUT-OFF       PULL OR ALTER CASING       WATER SHUT-OFF       REPAIRING WELL         SHOOT OR ACTDIZE       MULTIPLE COMPLETE       BANDON*       ALTERING CASING         REPAIR WELL       CHANGE PLANS       (Other)Abandon Teague Simpson & *       X         IT. DESCRIBE PROPOSED OR COMPLETE OPERATIONS (Clearly state all pertinent details, and give pertinent details, description on Well Completion or Recompletion Report and Log form.)         IT. DESCRIBE PROPOSED OR COMPLETE OPERATIONS (Clearly state all pertinent details, and give pertinent details, description of Recompletion on Well Completion or Recompletion Starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent details, and give pertinent details, description on Case of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent details, and give pertinent details, and give pertinent details, description on the complete in No. Teague Devonian         7440' PB. Pulled producing equipment. Set CIBP at 7450', capped with 10' cement abandoning Teague Simpson zone. Perforated 7''         casing with 2, ½'' JHPF at 7398' and 7408'. Ran treating equipment, acidized perforations 7398' and 7408' with 6,000 gallons 15% NEFE slick acid. Average pressure 3350#. Average injection rate 6 bpm. ISIP 2000#, after 15 minutes 1600#. Swabbed and cleaned up. Tested from North Teague Devonian zone. Well is shut in waiting on pipeline connection.		3304' GL		Lea N.M.
	TEST WATER SHUT-O FRACTURE TREAT SHOOT OR ACIDIZE REFAIR WELL (Other) 17. DESCRIBE PROPOSED O PROPOSED WORK, I nent to this work.) 7440' PB. P CIBP at 7450 casing with 7398' and 74 injection ra Tested from	NOTICE OF INTENTION TO: OFF PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS OR COMPLETED OPERATIONS (Clearly state all pertine) If well is directionally drilled, give subsurface locs Pulled producing equipment. Set 0', capped with 10' cement abar 2, ½" UHPF at 7398' and 7408', 408' with 6,000 gallons 15% NEH ate 6 bpm. ISIP 2000#, after 15 North Teague Devonian zone.	SUBSEQ WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)Abandon Teag (NoTE: Report result Completion or Recomp at details, and give pertinent dates thions and measured and true vertic recomplete CIBP at 8100', cappe idoning Teague Simpson Ran treating equipt FE slick acid. Average minutes 1600#. Swal Vell is shut in waitin	UENT REPORT OF: REPAIRING WELL ALTERING CASING ABANDONMENT* Gue Simpson & * X s of multiple completion on Well bletion Report and Log form.) including estimated date of starting any al depths for all markers and zones perti- in No. Teague Devonian ed with 35' cement. Set n zone. Perforated 7" ment, acidized perforations ge pressure 3350#. Average bbed and cleaned up. ng on pipeline connection.

8. I hereby certify that the foregoing is true and correct SIGNED TITLE	Area Engineer	
(This space for Federal or State office use)		ACCEPTED FOR RECORD
APPROVED BY TITLE TITLE		DATE
*See Instruct	tions on Reverse Side	U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO

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