

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424

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.)

RECEIVED

FEB 2 1981

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

1. OIL WELL ☐ GAS WELL ☐ OTHER ☐ SWD

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' FNL & 660' FWL

14. PERMIT NO.

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

3299' DF

5. LEASE DESIGNATION AND SERIAL NO.

LC-030187

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. E. LaMunyon

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

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

Sec 27-T23S-R37E

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) P&A Teague Simpson, log

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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 pertinent to this work.)*

POH with packer and tubing. Set CIBP at 8550', dump 35' cement on CIBP. Log 7200'-5200'. Load hole and close in well. Evaluate logs.

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

SIGNED

R. D. Pitre

TITLE

Area Engineer

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

1-30-81

FEB 5 1981

DISTRICT SUPERVISOR