	9 -3 31 7 1963)	DEPAR	UNITED STAT		SUBMIT IN TRIPLICA' (Other instructions on verse side)	re-	Form approved Budget Bureau E DESIGNATION AS	No. 42-R1424	
	GEOLOGICAL SURVEY						IC-030187		
	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.)						6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
	OIL GAS WELL	OTHER	Water Dispos	al Well	(ii)	7. UNIT	AGREEMENT NAM	E	
2. 1	NAME OF OPERATOR		made Dropes	<u></u>	201 (2)	8. FARM	OR LEASE NAME		
	GULF OIL COR	PORATIO	N			С. Е.	LaMunyon		
3.	ADDRESS OF OPERATOR			013	.079	9. WELI	NO.		
	P.O. Box 670	, Hobbs	, NM 88240	M 88240 13 1913 RVEY			49 7		
	P.O. BOX 670, Hobbs, NM 88240 LOCATION OF WELL (Report location clearly and in accordance with the State Figure ements. SURVEY See also space 17 below.) At surface 660' FNL & 660' FWL U. S. GEOLOGICAL NEW MEXICO						LD AND POOL, OR	WILDCAT	
4							e Simpson		
				U. S. GEO, NEV			11. SEC., T., R., M., OR BLE. AND SURVEY OR ARDA		
	660' FNL & 6	60' FWL	•				D		
14	PERMIT NO.		15. ELEVATIONS (Sho	w whether DF. I	RT. GR. etc.)	Sec 2	27-T23S-R3	/E 13. STATE	
11.	24.311 30.		10. 5220		9' DF	Lea		NM	
							<u></u>	INLI	
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or O						ita		
	NOTICE OF INTENTION TO:				SUB	SUBSEQUENT REPORT OF:			
	TEST WATER SHUT-OF	TE	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WE	LL	
	FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CAS	ING	
	SHOOT OR ACIDIZE	x	ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT	•	
	REPAIR WELL		CHANGE PLANS		(Other)(Note: Report res	ults of multir	ole completion on	Well	
-	(Other)		(0)	11	Completion or Reco	mpletion Rep	ort and Log form	ı.)	
	nent to this work.) 9221 PB. W		dize water disp	osal wel	1 with 3000 gallor	n s 20 % NI	E Hcl acid	•	
				•					
							_		
							•		
		2			_				
18. 1	hereby certify that	the foregoin	g is grue and correct			cn\			
	/7/	1,	1	ritle Area	a Engineer OV	ヒレノ、	ATE 10-15	-7 9	
	SIGNED	yn /	,,	FITLE ALC:	ODKO		ATE		
((This space for Fede	ral or State	office use)		16 19	19/128	7		
,	APPROVED BY			ritle	OCT 16 ING DISTRICT		ATE		
	CONDITIONS OF AR	PROVAL, I				ENGINEER			
					\ SISTRICT		=		
					ACTING DIE				
			*See	Instructions	on Reverse Side				