

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(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.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER Water Injection

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
1980' FSL + 660' FWL

14. PERMIT NO. _____

15. ELEVATIONS (Show whether OF, RT, CA, etc.)
3159' GL

5. LEASE DESIGNATION AND SERIAL NO.
LC 062368

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME
M. Hollander

8. FARM OR LEASE NAME
Devonian Unit

9. WELL NO.
117

10. FIELD AND FOOT, OR WILDCAT
Collarhide Devonian

11. SEC. T. R. M. OR RLC AND SURVEY OR AREA
Sec 4-T25S-R38E

12. COUNTY OR PARISH 13. STATE
Lea NM

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) _____

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) Clean out, acz

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☒

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 up PKV + thg Clean out to 8412' Acz 8295-8385' w/ 9000
gals 15% NEFE HCL. AP 2100 @ 3 BPM, ISIP 1800. GIH w/ 2 3/8"
thg + PKV, set PKV @ 8220'. Install WH eqpt + return to
injec. Inj 190 BWPD @ 1700# TP. Prior to work, inj 38
BWPD @ 2100# TP.

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

SIGNED R. P. Rite
ACCEPTED FOR RECORD

TITLE _____ Area Engineer

DATE 10-4-84

APPROVED BY AWQ
CONDITIONS OF APPROVAL OCT 2 1984

TITLE _____

DATE _____

Carlsbad

NEW MEXICO

*See Instructions on Reverse Side

RECEIVED

OCT 23 1984

O.C.D.
HOBBS OFFICE