Form 9-331

UNITED STATES

SUBMIT IN TRIPLICATE*

Form approved.

(Ma	DEPART	MENT OF THE INTER	IOR (Other instructions on r	5. LEASE D	ESIGNATION A	NO SERIAL NO.	
	GEOLOGICAL SURVEY				LC-030187		
	SUNDRY NOTI (Do not use this form for propose Use "APPLICA	6. IF INDIA	N, ALLOTTEE	OR TRIBE NAME			
1.	OIL GAS OTHER				REEMENT NAM		
2.	NAME OF OPERATOR			8. FARM OR	LEASE NAME	E	
	GULF OIL CORPORATION	ULF OTL CORPORATION					
3.	ADDRESS OF OPERATOR	9. WELL NO.					
	P. O. Box 670 Hobbs	s, NM 88240			1		
4.	LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface				Water Supply Well		
	660° FSL & 2180° FEL			SURV	, E., M., OR BI	;	
		(0)			(2 - 12)	IS - R37E	
14.	PERMIT NO.	15. ELEVATIONS (Show whether DE	•		. OR TRRIBE		
		32941	RKB	Lea		NM	
16.	Check Ap	propriate Box To Indicate N	Nature of Notice, Report, or	Other Data		•	
	NOTICE OF INTENTION TO:			QUENT REPORT	OF:		
	TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF		REPAIRING W	ELL .	
	FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT		ALTERING CA		
	SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	¹ .	ABANDONMEN		
	REPAIR WELL	CHANGE PLANS	(Other) Filled C		completion c	XX XX	
	(Other)		Completion or Recon	pletion Report	and Log for	m.)	

(Other) 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.)*

6281' TD

Piped valves off casing string above ground level. Filled Cellar - inspected by L. Clements & N. Clegg (6-26-79)

> RECEIVED JUL 2" 1979

U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO

SIGNED . Sike .	_ TITLE _	Area Engineer COR RECORD DATE 6-28-79
(This space for Federal or State office use)	TITLE _	1979 CVE PATE
APPROVED BY		U. S. GEOLOGICAL SURVEY DATE U. S. GEOLOGICAL SURVEY DATE HOBBS, NEW MEXICO
·	*See Instruci	tions on Reverse Side