Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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

5. LEASE DESIGNATION AND SERIAL NO.: LC 030179

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: Gulf Oil Corp.

8. FARM OR LEASE NAME: C. E. LaMunyon

3. ADDRESS OF OPERATOR: P. O. Box 670, Hobbs, NM 88240

9. WELL NO.: 43

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 560' FNL + 560' FWL

10. FIELD AND POOL, OR WILDCAT:

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec 21-T23S-R37E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3313' GL

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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	
(Other) Add Queen			

(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 w/ prod eqpt. Perf 5336-88', 5412-14', 5684-86' w/4 JSPF. Spot 15% NEFE. Acz w/ 6000 gals 15% NEFE. Swab. RIH w/ prod eqpt.

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

SIGNED R. D. Pate TITLE AREA ENGINEER DATE 1-25-85

(This space for Federal or State office use)

APPROVED BY L. Mark Hollis acting TITLE ACTING AREA MANAGER DATE 2-4-85

CONDITIONS OF APPROVAL, IF ANY: