

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-14164
2. NAME OF OPERATOR Gulf Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 670, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FN & WL, Section 5, 24-S, 35-E		8. FARM OR LEASE NAME Wilson Federal Com
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, OR, etc.)		10. FIELD AND POOL, OR WILDCAT Undesignated
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 5, 24-S, 35-E
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

Reached TD of 12-1/4" hole at 5345' at 11:00 PM, March 22, 1974. Ran 130 joints and 1 cut joint, 5312' of 9-5/8" OD 40# N-80 LT&C casing set and cemented at 5345' with 850 sacks of Class C neat. WOC 8 hours. TS indicated TOC at 3544'. WOC over 60 hours. Tested casing with 1500#, 30 minutes, OK.

Started drilling 8-3/4" hole at 5345' at 1:00 AM, March 27, 1974

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

SIGNED B. J. Bankley TITLE Area Engineer DATE March 27, 1974

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: