Form 9-331
(May 1963)

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.)

5. LEASE DESIGNATION AND SERIAL NO.: NM 20384
6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
7. UNIT AGREEMENT NAME:
8. FARM OR LEASE NAME: Wilson "C" Fed
9. WELL NO.: 1
10. FIELD AND POOL, OR WILDCAT: Undes. Bone Spring
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec 29-T26S-R34E
12. COUNTY OR PARISH: Lea
13. STATE: NM

1. OIL WELL ☐ GAS WELL ☐ OTHER
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' FNL + 660' FWL
14. PERMIT NO.:
15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3357' GL

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) Perf Bone Spring, Lt.			X
(Other)				(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.)*

Swab 10 BO + 10 BW in 9 hrs, 9-4-84.

ACCEPTED FOR RECORD
AUG 20 1985
CARLSBAD, NEW MEXICO

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

SIGNED [signature] for TITLE Area Engineer DATE 9-12-84

(This space for Federal or State office use)

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

*See Instructions on Reverse Side