NO. OF COPIES RECEIVED						30-025-26105 Form C-101	
SANTA FE						Revised 1-1-65 5A. Indicate Type of Lease STATE XX FEE	
U.S.G.S.						.5. State Oil & Gas Lease No.	
OPERATOR OPERATOR					в-229		
<u> </u>					IIIIII		
	N FOR PERMIT TO	DRILL, DEEPEN, C	R PLUG BACK		7111111		
la. Type of Work					7. Unit Agre	ement Name	
b. Type of Well PLUG BACK					8, Farm or Lease Name		
OIL GAS SINGLE MULTIPLE ZONE ZONE						Arnott-Ramsay (NCT-B)	
2. Name of Operator					9. Well No.		
GULF OIL CORPO	RATION				5	1.75-1 10/12	
3. Address of Operator						10. Field and Pool, or Wildcat Langlie Mattix	
P. O. Box 670, Hobbs, New Mexico 88240 4. Location of Well UNIT LETTER 0 LOCATED 330 FEET FROM THE South LINE						TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT	
UNIT LETTE	r 0 too	ATEO 330 FE	ET FROM THE SOU	thLINE			
1650	Foot	E OF SEC. 32 TV	P. 25-S RGE. 3	7~E NMPM			
AND 1650 FEET FROM	THE East LIN	E OF SEC. 32		THITTH	12. County	<i>XHHHH</i>	
					Lea		
(++++++++++++++++++++++++++++++++++++	<i>HHHHHH</i>	/////////////////////////////////////	/////////////////////////////////////	<i>HHHH</i>	THIT	HHHHH	
	/////////////////////////////////////	111111111111111111111111111111111111111	Proposed Depth	19A. Formatio	n	20. Rotory or C.T.	
			3500†	Que	een	Rotary	
21. Elevations (Show whether DF,	RT, etc.) 21A. Kind	& Status Plug. Bond 21	B. Drilling Contractor		22. Approx	. Date Work will start	
2984' GL	В	lanket				11-15-78	
23.	Ė	ROPOSED CASING AND	CEMENT PROGRAM				
		ROPOSED CASING AND					
SIZE OF HOLE					F CEMENT	EST. TOP	
12-1/4"	8-5/8"	24.0#			0	Circulate	
7-7/8"	4-1/2"	9 . 5排	3500'	130	00	Circulate	
MOTE - Coo Att	eached POD Dwerre	ina Na 2					
NOTE: See Att	ached BOP Drawi	ing No. 2					
Circula	ting Media:	0' - 360'	Fresh water s	സർ അർ			
GIICUIA	icing riedia.	300	11Con water b	paa maa			
	36	50' - 3500'	Brine water				
	•		20-00-				
						•	
Gas is not dedicated.							
IN ABOVE SPACE DESCRIBE PR	DOPOSED PROGRAM: IF	PROPOSAL IS TO DEEPEN OF	PLUG BACK, GIVE DATA	ON PRESENT PR	ODUCTIVE ZONE	E AND PROPOSED NEW PRODUC	
TIVE ZONE. GIVE BLOWOUT PREVENT	ER PROGRAM, IF ANY.						
I hereby certify that, the information	on above is true and com	plete to the best of my kn	owledge and belief.				
\mathbb{R}_{+} , \mathbb{R} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L}	ada di	Tata Area Pro	duction Manag	er	pate 10	-09-78	
Signe'l		_ Title Area Pro					
(This space for	State Use)	2		Marcellant of	7%, <i>je</i> c, so		
(/	1.1/	SITTERY	THE SILL BY NATH		00	1 13/80	
APPROVED BY						<i>,</i> .	
// !	er Anni	TITLE			DATE		
CONDITIONS OF APPROVAL, IS	en out	_ TITLE			DATE	100	