| NO. OF COPIES RECEIVED   |   |  |                                    |                    |                              |   |
|--|---|--|------------------------------------|--------------------|------------------------------|---|
| DISTRIBUTION SANTA FE  | NEW MEXICO OIL CONSERVATION COMMISSION      |  |                                    |                    | Form C-101<br>Revised 1-1-65 |   |
| FILE   |   |  |                                    | F                  | 5A. Indicate                 | Type of Lease                           |
| U.S.G.S.   |   |  |                                    |                    | STATE 5                      | FEE .                                   |
| LAND OFFICE  |   |  |                                    | F                  | 5. State Oil &               | Gas Lease No.                           |
| OPERATOR   |   |  |                                    |                    | ~~~~                         | B-229                                   |
| ADDITION FOR REPUIT TO PRILL PREPER OF PLANS PLANS             |   |  |                                    |                    |                              |   |
| APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK          |   |  |                                    |                    | 7. Unit Agreement Name       |   |
|  | 1   | £  |                                    |                    | 7. Onit Agree                | ment Name                               |
| b. Type of Well DRILL  | J   | DEEPEN   | PLUG E                             | BACK X             | 8. Form or Le                | ase Name                                |
| OIL X GAS WELL   | OTHER                                       |  | SINGLE MUL                         | [                  |                              | msay(NCT-B)                             |
| 2. Name of Operator  |   |  |                                    |                    | 9. Well No.                  |   |
| Gulf Oil Cor   | poration                                    |  | •                                  |                    | 7                            | •                                       |
| 3. Address of Operator   |   |  |                                    |                    | 10. Field and                | Pool, or Wildcat                        |
| P. O. Box 67   | O, Hobbs, NM                                | 88240  |                                    |                    | Ja1ma                        | t                                       |
| UNIT LETTI   | ER I  | CATED 2130 1                                     | EET FROM THE South                 | LINE               |                              |   |
| AND 990 FEET FROM  | <del></del> .                               | •  |                                    |                    |                              |   |
| AND 990 FEET FROM  | THE East                                    | NE OF SEC. 32                                    | WP. 255                            | 37ENMPM            | 12. County                   | 77///////////////////////////////////// |
|  |   |  |                                    |                    | т                            |   |
|  | HHHHH                                       | <del>/////////////////////////////////////</del> | HHHHHH                             | 411111             |                              | HHHHm                                   |
|  |   |  |                                    |                    |                              |   |
|  |   |  | 9. Proposed Depth 1                | 9A. Formation      |                              | 20. Rotary or C.T.                      |
| 21. Elevations (Show whether DF,                               |   |  |                                    |                    |                              |   |
| 2997 t   | , KI, etc.) 21A. Kind                       | & Status Plug. Bond                              | 21B. Drilling Contractor           |                    | 22. Approx.                  | Date Work will start                    |
| 23,  |   |  |                                    |                    | <u> </u>                     |   |
|  | P   | PROPOSED CASING AND                              | CEMENT PROGRAM                     |                    |                              | •                                       |
| SIZE OF HOLE   | SIZE OF CASING                              | WEIGHT PER FOOT                                  | SETTING DEPTH                      | SACKS OF           | CEMENT                       | EST. TOP                                |
| No New Casing  |   | ļ  |                                    |                    |                              |   |
|  | ,   |  |                                    | <del> </del>       |                              |   |
|  |   |  |                                    |                    |                              |   |
| POH with production 1000#. Log 3140 by logs. Acidia            | 0'-surface. Pe                              | rf with (2) ½"                                   | 3140', cap with<br>burrless JHPF a | 35' cement interva | nt. Tes<br>als reco          | t casing                                |
| by rogu. Actui   | Le as required.                             |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  |   |  |                                    |                    |                              |   |
|  | •   |  | •                                  |                    |                              |   |
| IN ABOVE EDICE OF  |   |  |                                    |                    |                              |   |
| IN ABOVE SPACE DESCRIBE PR<br>TIVE ZONE. GIVE BLOWOUT PREVENTE | OPOSED PROGRAM: IF I<br>ER PROGRAM, IF ANY. | PROPOSAL IS TO DEEPEN O                          | R PLUG BACK, GIVE DATA ON          | PRESENT PROD       | UCTIVE ZONE A                | ND PROPOSED NEW PRODU                   |
| I hereby certify that the information                          | on above is true and comp                   | olete to the best of my ki                       | nowledge and belief.               |                    |                              | - · · · · · · · · · · · · · · · · · · · |
| Signal RDP   | :1-   | Will Amon Th                                     | ~                                  |                    |                              | <b></b>                                 |
| gricu  |   | Title Area Er                                    | RTHEEL                             | Do                 | ite                          | 7-16-81                                 |
| (This space for S  | state Use)                                  |  |                                    |                    |                              |   |
| ABBROVED BY JUSTICE  | with the                                    | نسانية <b>ك</b> ا                                | MICOR DISTRI                       | CT 1               |                              | . 24 1931                               |
| CONDITIONS OF APPROVAL, IF                                     | ANY:  | . TITLE  |                                    | D#                 | ATE                          |   |
| 1,7,000,00   |   |  |                                    |                    |                              |   |