

NEW MEXICO OIL CONSERVATION COMMISSION

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| OPERATOR | | |

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-2736-3

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

| | |
|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 7. Unit Agreement Name |
| 2. Name of Operator <i>Continental Oil Company</i> | 8. Farm or Lease Name <i>State A-26</i> |
| 3. Address of Operator <i>P. O. Box 460, Hobbs, New Mexico 88240</i> | 9. Well No. <i>2</i> |
| 4. Location of Well UNIT LETTER <i>PL</i> , <i>1980</i> FEET FROM THE <i>South</i> LINE AND <i>660</i> FEET FROM THE <i>West</i> LINE, SECTION <i>26</i> TOWNSHIP <i>19-S</i> RANGE <i>36-E</i> NMPM. | 10. Field and Pool, or Wildcat <i>Emancipation (B-5A)</i> |
| 15. Elevation (Show whether DF, RT, GR, etc.) <i>3710' DF</i> | 12. County <i>Rea</i> |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

| | | | |
|--|---|--|--|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUS AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <i>Shut in</i> <input checked="" type="checkbox"/> |

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Status of Well: *Shut-in*
 Approximate date that temp. aban. commenced: *4-12-70*
 Reason for temp. aban.: *Uneconomic*
 Future plans for Well: *Holding for secondary recovery operations.*

Expires 11/1/75

Approximate date of future W.O. or plugging: *Fall '76*

19. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *[Signature]* TITLE *Division Office Manager* DATE *10/30/70*

APPROVED BY *[Signature]* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
NMOCC-4, File