

UNIT STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLIC.  
(Other instructions on  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

*NM-1151*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

*Sanderson B-1*

9. WELL NO.

*2*

10. FIELD AND POOL, WILDCAT  
*Eumont Gas and  
Monument oil*

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

*Sec 10, T-205 R-36E*

12. COUNTY OR PARISH

*Lee*

13. STATE

*N. Mex*

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  GAS WELL  OTHER

*Dual Completion*

2. NAME OF OPERATOR

*Continental Oil Company*

3. ADDRESS OF OPERATOR

*Box 460 Hobbs, New Mexico*

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

*1650' FNL and 330' FEL of Sec 10*

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

*3598' df*

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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.)\*

*The Monument oil zone was abandoned but not permanently plugged with a tubing bridge plug. Work done as follows: Set tubing plug at 3672'. Perforated tubing at 3576' and placed Eumont gas zone on production.*

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

SIGNED

*M. E. Yeakley*

TITLE

*Admin. Supervisor*

DATE

*10-27-72*

(This space for Federal or State office use)

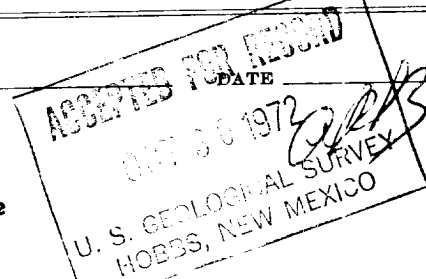
APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side



*USGS (S) WAFLOW F.P.*