

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE
(Give Budget Office copy on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

JUN 13 10 07 AM '67

C.
6. LEASE DESIGNATION AND SERIAL NO. LC 031X622 (A)
7. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Sanderson "A"
9. WELL NO. 8
10. FIELD AND POOL, OR WILDCAT Monument Grayburg
San Andres Pool
11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA Sec. 14, T-20S, R-36E
12. COUNTY OR PARISH Lea 18. STATE N.M.

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

2. NAME OF OPERATOR
Continental Oil Company

3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
330' PNL & 1650' FEL of Section 14, T-20S, R-36E,
Lea County, New Mexico

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, ST, GR, etc.)
3571' D.F.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(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.)*

The subject well has ceased to produce.

It is proposed to perform a string shot and acid job in an attempt to return the well to a producing status.

A subsequent report will be submitted upon completion of this work.

APPROVED
JUN 6 1967
A. R. Brien
A. R. Brien
DISTRICT ENGINEER

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

SIGNED *James D. Hart* TITLE Supervising Engineer DATE 6-5-67

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
USGS-5 ATL-Rosw-2 PAN AM-Hobbs-2 CHEV-Mid-2