

(May 1963)

DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)
GEOLOGICAL SURVEY

DESIGNATION AND SERIAL NO.

LC-030143 (6)

IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

RECEIVED
NOV 1 1974
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

1. OIL WELL GAS WELL OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Continental Oil Company

8. FARM OR LEASE NAME
Lease B

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

9. WELL NO.
6

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

10. FIELD AND POOL, OR WILDCAT
Permian Gates
Spoon Hammer

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

990' FSL & 1650' FEL of Sec. 23

Sec. 23, T-205, R-36E

14. PERMIT NO.

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

12. COUNTY OR PARISH 13. STATE

3573' DF

NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Shut in

(NOTE: Report results of multiple completion or 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.)*

Status of Well: Shut in

Approximate date that temp. aban. commenced: 4-30-64

Reason for temp. aban.: Uneconomic

Future plans for Well: Holding for secondary recovery operations.

This approval of temporary abandonment expires Dec 1/1975

Approximate date of future W. O. or plugging: Fall, 1976

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

SIGNED [Signature]

TITLE Division Office Manager

DATE 10/30/74

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

USGS-5, NMFU-4, File

*See Instructions on Reverse Side

NOV 6 1974
[Signature]
JULI SIMS
ACTING DISTRICT ENGINEER