

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

LC 031741 (b)

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 <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	NMFU
3. ADDRESS OF OPERATOR	8. FARM OR LEASE NAME
Continental Oil Company	Hawk B-1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	9. WELL NO.
1980' FSL & 660' FEL of Sec. 8, T-21S, R-37E Lea County, New Mexico, NMPM	11
14. PERMIT NO.	10. NAME AND BOO OR WILDCAT
	NMFU Field
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
3538 DF	Sec 8, T-21S, R-37E
	12. COUNTY OR PARISH
	Lea
	13. STATE
	N.M.

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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Triple Complete

(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 Blinebry Oil zone and the Tubb Gas zone underlying the Hawk B-1 lease were tested in conjunction with a triple completion of subject well with the presently producing Drinkard. The following procedures were used: Before workover - pay - Drinkard 6539-6629. Perfs 6539, 6546, 6554, 6566, 6572, 6594, 6608, 6619, & 6629 W/1 JSPF. Drinkard IP: Tested 2-2-65, SI 2-3-65 while work on Blinebry & Tubb was performed. Latest test - flwd 336 BO, no wtr in 24 hrs W/446 MCFGPD on 20/64 chk. CP Pkr, TP 500, GOR 1237, daily allow 71 BO. Work done: Perf Tubb 6416, 6421, 6432, 6435, 6441, 6445 & 6451 W/1 JSPF. Acidized 6416-6451 W/3500 gals Unisol acid using 10 ball sealers. Perf Tubb 6254, 6262, 6268, 6277, 6282, 6291, 6298, 6304, 6315, 6319, 6334, 6341, 6352, 6360, 6366, 6378 W/1 JSPF. Acidized 6254-6378 W/10,000 gals Unisol acid using 20 ball sealers. Squ Tubb perfs 6254-6451 W/150 sx class C cmt. Drld out cmt 6175-6451. Perf Blinebry 5811, 5829, 5835, 5882, 5902, 5929, 5952, 5964, 5978, 5984, 5997, 6016, 6044, 6067, 6074 & 6083 W/1 JSPF. Acidized 5811-6083 W/2000 gals 15% Unisol acid using 20 ball sealers. Sandfraced W/30,000 gals crude, 30,000# sd & 1500# "ADOMITE" Additives. Perf Blinebry 5667, 5680, 5688, 5729, 5739, 5756, 5767, 5779 W/1 JSPF. Acidized 5667-5779 W/2000 gals 15% acid using .5% HC2 & 8 ball sealers. Squ perfs 5667-6083 W/240 sx class C cmt. Drld cmt 5523-6083. Drinkard Pot on 2-2-65. After workover - TD 6775, PBD 6646, Pay -Drinkard 6533-6632. Perfs - all perfs in Tubb & Blinebry

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

SIGNED SIGNED [Signature]TITLE Staff SupervisorDATE 3-18-65

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

USGS-5, NMOCC-2, JM PAN AM HOBBS-3, ATL ROS-2, CALIE HOUS & MID - 1 ea.

*See Instructions on Reverse Side

J. L. GORDON
ACTING DISTRICT ENGINEER