

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR
Continental Oil Company

3. ADDRESS OF OPERATOR
P.O. Box 460, Joplin, Mo. 64501

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: *1980' ASL + 660' TWD*
AT TOP PROD. INTERVAL: *-*
AT TOTAL DEPTH: *-*

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) *change well number.*

5. LEASE

LC 063458

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

MMZU

8. FARM OR LEASE NAME

Warren Unit

9. WELL NO.

5460

10. FIELD OR WILDCAT NAME

Blondy-Twin

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

Sec 36, T20S, R38E

12. COUNTY OR PARISH

Lea

13. STATE

MM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

5546' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

It is proposed to change the number of subject well from 54 to 60, in order to reflect our order of drilling. This location was approved 3-31-77 as well no. 45

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED

W. A. Butterfield

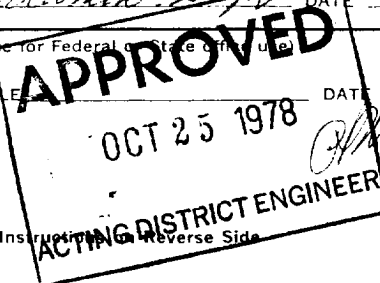
TITLE

Acting District Engineer

DATE

*10-23-78*APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:*2555 (5)**MMZU (1)**1. R.*

(This space for Federal or State official use)



*See Instructions on Reverse Side