Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.: LC 037777(b)

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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER Injection well

7. UNIT AGREEMENT NAME: Forest Pool Unit

2. NAME OF OPERATOR: Continental Oil Company

8. FARM OR LEASE NAME: Forest Pool Unit

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

9. WELL NO.: 8

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1980' FNL and 660' FEL of Sec 34

10. FIELD AND POOL, OR WILDCAT: Square Lake G-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec 34, T-16S, R-29E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3661' gr

12. COUNTY OR PARISH: Eddy

13. STATE: N.M.

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)			
(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.) *

Reference is made to your letter of Sept 9, 1971 and our original intent on this well. The work proposed on our original intent will not be performed until the early part of 1972. Please cancel this intent and we will submit another one at a later date.

RECEIVED
SEP 17 1971
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

ARTESIA, OFFICE

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

SIGNED Hugh Orgain TITLE Administrative Supervisor DATE 9-16-71

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
SEP 17 1971
H. L. BEEKMAN
ACTING DISTRICT ENGINEER

Artesia - USGS (5) File CRA(1)

*See Instructions on Reverse Side