

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved
Budget Bureau No. 42-R1424

6. LEASE DESIGNATION AND SERIAL NO.

LC 037777 (6)

7. IF INDIAN, ALGUTTE 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 ☐

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 of casing and in accordance with any State requirements.
See also space 17 below.)
At surface:

330' FSL + 810' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, KT, OR, etc.)

3614' DF

12. COUNTY OR PARISH

El Paso

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)

Temporary Abandon

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☐
☒
☐

(NOTE: Report results of multiple completion on Well Completion or Res. Completion 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 surface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Status of Well: Temporarily Abandoned

Approximate date that temp. aban. commenced: 6-14-71

Reason for temp. aban.: Unknown

Future plans for well: Sell or plug

RECEIVED

OCT 21 1975

O. C. C.
ARTESIA, OFFICE

RECEIVED

SEPT 21 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

Approximate date of future W. O. or plugging: 4th Q. '75

18. SIGNATURE OF OPERATOR (Print name and title)

W. D. Williams

TITLE Asst. Asst.

DATE 9-24-75

APPROVED

W. D. Williams

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO USE OR PLUGGED BY
APRIL 4

OCT 1 - 1976

*See Instructions on Reverse Side