

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Form approved,
Budget Bureau No. 42-11124,
5. LEASE DESIGNATION AND SERIAL NO.

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 clearly and in accordance with any State requirements.
See also 16-17 below.)
At surface

7. UNIT AGREEMENT NAME
Joint Pool Unit
8. FARM OR LEASE NAME
Joint Pool Unit
9. WELL NO.
17

10. FIELD AND POOL, OR WILDCAT
By John G. SA
11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA
Sec 34 T. 16 S. R. 29 E

14. PERMIT NO.
15. ELEVATIONS (Show whether DT, RT, GR, etc.)
3621' DF

12. COUNTY OR PARISH
Eddy
13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
(Other) ☒ Temp. Abandon	

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: Temporarily Abandoned

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

Reason for temp. aban.: Unconformity

Future plans for well: Sell or plug

RECEIVED

OCT 21 1975

O. C. C.
ARTESIA, OFFICE

RECEIVED

OCT 21 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

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

SIGNED: B. D. Dillman

TITLE: As Staff Asst

DATE: 9-24-75

APPROVED

OCT 26 1975

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL 1 - 1976

See Instructions on Reverse Side