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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

JUL 14 11 34 AM '65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name State S-30
9. Well No. 2
10. Field and Pool, or Wildcat Empire Field Abo Pool
12. County Eddy

**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 -" (FORM C-101) FOR SUCH PROPOSALS.)

**RECEIVED**

1. OIL WELL ☒ GAS WELL ☐ OTHER-  
2. Name of Operator  
Continental Oil Company, P.O. Box 460  
3. Address of Operator  
Hobbs, New Mexico  
4. Location of Well  
UNIT LETTER F 2310 2110 FEET FROM THE North LINE AND 1254 FEET FROM THE West LINE, SECTION 30 TOWNSHIP 17-S RANGE 29-E NMPM.  
15. Elevation (Show whether DF, RT, GR, etc.)  
3643 Gr

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

The subject well's existing perforations were acidized using the following procedure:

Before Workover - TD 6353, PB 6327, DF 10' AGL. DF Elev 3658. Csg pt 5 1/2" @ 6353'. Pay 6270-6325 Abo Reef. Perfs 6276-6300. Latest test dated 4-7-63 - flwd 61 BO, 0 BW in 24 hrs W/63 MCFGPD on 48/64" chk. GOR 1032. Daily allow 61 BO. Work done: Acidized intervals 6276-6300 W/1500 gals 15% ISTNE Acid. After workover - no change in TD, PB, DF, DF Elev, Csg Pt, Pay, NEP or Perfs. Flwd 92 bbls 40 deg gravity oil, 3 BW in 6-3/4 hrs W/58.7 MCF on 24/64" chk. CP Pkr TP 330 lbs GOR 638. DOR 327. Daily allow 66 BO. Workover started 7-7-65, completed 7-8-65. Date tested 7-8-65.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED: ROBERT GAULT III

SIGNED \_\_\_\_\_ TITLE Staff Supervisor DATE 7-13-65

APPROVED BY McArmstrong TITLE OIL AND GAS INSPECTOR DATE JUL 19 1965  
CONDITIONS OF APPROVAL, IF ANY:  
NMOCC-5, SLO LPT