

N. M. O. C. COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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on re-

Form approved.  
Budget Bureau No. 42-R1424.

**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.)

<p><b>RECEIVED</b></p> <p style="font-size: 1.2em;">DEC 21 1973</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. <i>NM 0454238 (6)</i></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <i>Lincoln Federal</i></p> <p>9. WELL NO. <i>2</i></p> <p>10. FIELD AND POOL OR WILDCAT <i>Catchew Draw</i> <i>Merrill Box</i></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 2, T-21S R-25 E</i></p> <p>12. COUNTY OR PARISH <i>Eddy</i></p> <p>13. STATE <i>N. Mex.</i></p>
<p>1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR <i>Continental Oil Company</i></p> <p>3. ADDRESS OF OPERATOR <i>P.O. Box 460 Hobbs, New Mexico 88240</i></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>1650' FSL &amp; 1650' FEL of Sec. 2</i></p> <p>14. PERMIT NO.</p> <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3258' GR</i></p>		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <i>Setting Intermediate String</i> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion or 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.) \*

*Set 9 5/8" 36# casing at 2,319'. Cemented with 921 sacks class "C" cement. Circulated cement to surface. Perforated casing with 1,000#, held O.K.*

**RECEIVED**

DEC 17 1973

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED <i>R. W. Gault III</i>	TITLE <i>Division Office Manager</i>	DATE <i>12-14-73</i>
(This space for Federal or State office use)		
APPROVED BY <i>[Signature]</i>	TITLE <i>[Signature]</i>	DATE <i>DEC 19 1973</i>
CONDITIONS OF APPROVAL, IF ANY:		

*USGS-5 (Artesia)  
Woods Pet. Corp.  
File*

\*See Instructions on Reverse Side