

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-18327

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	8. TERM OR LEASE NAME Conoco 29-4
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1820' FSL + 970' FWL of Sec. 28	10. FIELD AND POOL, OR WILDCAT East San Juan - Gallup
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 7403.0 GL
	11. SEC., T., R., M. OR BLM. AND SURVEY OR AREA Sec. 28, T-29N, R-4W
	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

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) Shut-In	(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.)*

Status of Well: Shut-In

Approximate date that temp. aban. commenced: 12-23-73

Reason for temp. aban.:

WELL SHUT IN PENDING SALES LINE CONNECTION.

Future plans for Well:

OBTAIN PIPELINE CONNECTION.

Approximate date of future W. O. or plugging: EXPECT CONNECTION BY FALL, 1976

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

SIGNED: [Signature]

TITLE: Division Office Manager

DATE: 10/30/74

(This space for Federal or State office use)

APPROVED BY: _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE: _____

DATE: _____