

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-B424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-18321

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Canoco 29-4

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

E. San Juan - Mesquite
- Piedra Blanca11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 12, T-29N, R-4W

12. COUNTY OR PARISH

13. STATE

Rio Arriba NM

1. OIL ☐ GAS ☒ 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 space 17 below.)
At surface

1720' FSL + 1510' FWL of Sec. 22

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CB, etc.)

7130' GR

18. 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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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: Temporarily Abandon

Approximate date that temp. aban. commenced: 2-28-74

Reason for temp. aban.: TESTED NON-COMMERCIAL AFTER COMPLETION.

Future plans for Well:

STUDY FOR RECOMPLETION IN FRUITLAND FORMATION.

Approximate date of future W. O. or plugging: EXPECT WORKOVER BY OCT, 1976.

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

SIGNED

Robert Daulton

TITLE

Division Office Manager

DATE

10/30/74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: