

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 1-89-IND-56	
2. NAME OF OPERATOR Continental Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
3. ADDRESS OF OPERATOR 152 North Durbin, Casper, Wyo. 82601		7. UNIT AGREEMENT NAME Rattlesnake Gov't.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 567' FNL, 714' FWL (Unit Letter D)		8. FARM OR LEASE NAME Rattlesnake - Penn. BCD	
14. PERMIT NO.		9. WELL NO. 141	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5315' RB		10. FIELD AND POOL, OR WILDCAT Rattlesnake - Penn. BCD	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T29N, R19W	
		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

Well History: TD 6742', PBTD 6627'. 13 3/8" surface casing, 48#, H-40 set at 316' and 9 5/8" intermediate casing, 36#, J-55 set at 4585'. 7" production casing, 23#, J-55 set at 6627'. Open-hole 6627-6742'. Casing is presently collapsed at 3500'.
Well Status: Oil temporarily shut-in.

We propose to plug the well as follows:

Set 38-sack cement plug with bottom at 3500' in 9 5/8" casing.

Spot 35' plug in surface casing.

Set 10' length of 4" pipe in surface plug so that it projects at least 4' above ground level.

Top of 4" will be capped and a marker attached or welded on pipe.

*An attempt should be made to run tubing to TD and plug lower zone 6400-6600' and top of Hennessey w/150' plug 5475-5625 and 100' plug at top of liner 3975-4075. If 9-5/8" has completely collapsed a 150' is permissible from 3350-3500'. Surface plug of 30' with marker.

USGS(6) NMOGCC(2) File(2)

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

SIGNED Elmer L. Chulji

TITLE Administrative Supervisor

DATE 8-18-71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side