

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC 032096(a)
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

2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR
Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FNL & 1980' FEL of Sec. 27

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
LOCKHART A-27

9. WELL NO.
6

10. FIELD AND POOL, OR WILDCAT
DRINKARD

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 27, T-21S, R-37E

12. COUNTY OR PARISH
LEA

13. STATE
N.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3412' DF

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 checked="" 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) <input type="checkbox"/>	

(Other) **REPAIR COMMUNICATIONS**

(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.)*

In order to increase the current producing rate & ultimate recovery, & also to repair communications between the prod. & inter. strings of csq., the following work is proposed: Run csq. inspection log & repair csq. Anticipate a cement squeeze of 150 sacks Class "C" cement. Perf 7" csq @ 6363', 94', 6424', 38', 49', 55', 70' & 6475'. Treat parts 6363'-6475' w/1800 gals 15% HCL-NE Acid using 12 ball sealers. Pump prod of 4,000 gals trtd. fresh wtr containing 200# "ADOMITE AQUA" & 100# Guar (gal.). Pump 25,000 gals trtd fresh wtr containing 625# "ADOMITE AQUA", 1000# Guar (gal) & 50,000# sand. Overflush & shut-in overnight. Return to producing status.

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

SIGNED *[Signature]* TITLE SR. ANALYST DATE 3-11-75

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS/S, NMFU-4, File

*See Instructions on Reverse Side

APPROVED

MAR 14 1975

[Signature]

ACTING DISTRICT ENGINEER