

UNI STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other inj. well

2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY

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

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FNL - 1980' FEL

AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) <u>CONV. TO INJ.</u>			<u>X</u>

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

1-17. MRL. begin pulling prod. eqpt.
 1-18. fin. pool. , c.o. to 9007'
 1-19. c.o. to 9040' begin running inj eqpt.
 1-20 P.L. tbg set @ 8836' pkr @ 8766'
 circ. backside w/ 190 bbls pkr fluid.
 val. rig.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Wm A. Butterfield TITLE Admin. Supv DATE 4-2-79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

USGS 5
NMFU 4
FILE

5. LE LC 0316952

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME NMFU

8. FARM OR LEASE NAME WARREN UNIT MCKEE

9. WELL NO. 23

10. FIELD OR WILDCAT NAME WARREN MCKEE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 29 T-20S R3EE

12. COUNTY OR PARISH LEA 13. STATE NM

14. API NO. _____

15. ELEVATIONS (SHOW DF, KDB, AND WD) _____

RECEIVED

APR 3 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

ACCEPTED FOR RECORD

APR 3 1979
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*See Instructions on Reverse Side