

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(One of instructions on the
reverse side)

Revised Bureau No. 40-1112-57
LEASE DESIGNATION AND SERIAL NO.

NM 9086

SUNDRY NOTICES AND REPORTS ON WELLS - 3 1971

(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.)

CONSERVATION COMM

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER *Dry hole*

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

1980' FNL and 990' FEL of Sec 31

14. PERMIT NO. 16. ELEVATIONS (Show whether DF, RT, GR, etc.)
4408' gr

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Williams Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA
Sec 31, T-5N, R-24E

12. COUNTY OR PARISH 13. STATE
De Baca N. Mex

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐

PLUG OR ALTER CASING

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☐
☒
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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☐
☐

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.)

It is proposed to abandon this well by setting cement plugs as follows: 50 socks from 1356' to 1120'; 50 socks from 850' to 614'; 50 socks from 486' to 250' and 10 socks from 44' to surface.

RECEIVED

DEC 6 1971

G. C. C.
ARTESIAL OFFICE

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

SIGNED *[Signature]* TITLE *Administrative Supervisor* DATE *11-29-71*

(This space for Federal or State office use)

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

* USGS (5) File

→ Durango, Colo *See Instructions on Reverse Side