

UNITED 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 ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

PO Box 460 Hobbs, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: *660' FSL & 1980' FEN*

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: *same*

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☒
☐
☐
☐
☐
☐
☐

5. LEASE

LC 029406 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Grace Mitchell B

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Baish Maljamar - Hawaii

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 5, T-17S, R-32E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

14. API NO.

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

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

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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.)*

*Subject well was acidized as follows:**10-1 acidize San Andres Lavington OH (1025-4045') as follows:**Pumped 750 gals HCl-NE acid (15%), divert w/ 200 gal
yellow brine water, 750 gals acid, 200 gal divert, 750
gals acid. 35 bbls TFW.**pull work string, set prod. eqpt. rel. vq.
10-17 pump 9:30. OBW*

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

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

SIGNED

Wm. D. Butterfield

TITLE

Admin. Supv.

(This space for Federal or State use)

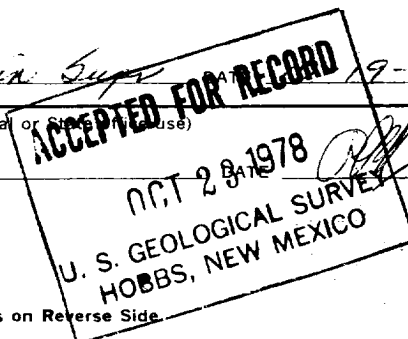
APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*USGS (5)**File*

*See Instructions on Reverse Side



RECEIVED

OCT 24 1978

COMM. ADMS. H. M.