Form approved. Budget Bureau No. 42-R1424. UNIT STATES SUBMIT IN TRIPLIC (Other instructions of the INTERIOR verse side) Form 9-331 (May 1963) 5. LEASE DESIGNATION AND SERIAL NO. 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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 "APPLICATION FOR PERMIT—" for such proposals.) 7. UNIT AGREEMENT NAME WELL X 8. FARM OR LEASE NAME OTHER NAME OF OPERATOR CONTINENTAL OIL COMPANY MCA BOX 460 HOBBS MEW MEXICO
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*
See also space 17 below.)
At surface 188 10. FIELD AND POOL, OR WILDCAT MALJ G-SA REPRESS 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1980' FSL & 1980 FWL OF SEC. 26 SGC 26 T175-R32E 12. COUNTY OR PARISH 13. STATE 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 3960 DF

TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL

MULTIPLE COMPLETE ALTERING CASING FRACTURE TREATMENT ABANDON\* SHOOTING OR ACIDIZING ABANDONMENT\* CHANGE PLANS (Other) (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.) •

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

TREATMENT WAS PERFORMED WITH THE FOLLOWING PROCEDURE: SPOTTED SND AT 9203 AND SET PER AT 9000. FRACO OH W/50,000 GAL TRID GELLED PROD WIR W/75,000 # 20-40 SLID IN TWO EQUAL STAGES. DIVERTED BETWEEN STAGES W/ 1007 BENZOIC ACID & 2000 ROCK SALT. I OR TH-763 CHEM AFTER 20,000 GAL IN EACH STACE MAX PRESS 4,000 PSI NAIN PRESS 3,400 PSI AUG PRESS 3700 PS/ AIR 17 BPM, ISIP 1750 PSI, 10 MIXI SIP 1900 PSI. CLEANED OUT TO 4318 PLACED ON PRODUCTION

TEST 3-8-72 3 BOAD, 2 BWAD 7 MICFGAD

NOTICE OF INTENTION TO:

92 BOAD, 34 BWAD 61 MICFGPD

18. I hereby certify that the foregoing is true and correct		SUACRVISOR	DATE 4-1/-7	
(This space for Federal or State office use)				
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	ACCEPTE	DEAR RECORD	

uses ( 3) MCA (3) FILE

16.

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

\*See Instructions on Reverse Side

APR 1 3 1972

SUBSEQUENT REPORT OF:

U. S. WEULOGILAL DURVEY HOBBS, NEW MEXICO

OIL CHARTS ATTEM COMM.