Form	9- -3 31
(May	1963)

UNI) STATES DEPARTM

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(Other instructions	Ĺ
verse side)	

Form approved. Budget Bureau No. 42-R1424. ASE DESIGNATION AND SERIAL NO.

ENI	OF THE INTERIOR	(Other instructions careverse side)	5. LE

GEOLOGICAL SURVEY	26 05 1210
INDRY MOTICES AND DEPORTS ON WELLS	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.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. OIL GAS GAS WELL OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental oil Company	8. FARM OR LEASE NAME MCA Unitalia
3. ADDRESS OF OPERATOR BOX 460 Hobbs, New Moxico	
4. LOCATION OF WELL (Report location clearly and in accordance with any state requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Maly G-SA Representation 11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA
1980'FSL and 1980 FWL of Sec 27 14. PERMIT NO. [15. ELEVATIONS (Show whether DF, RT, GR, QC.)]	Sec 27, T-175, R-32E 12. COUNTY FOR PARISH 33. STATE

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

NOT	ICE OF INT	ENTION TO:	SUBSEQU	ENT REPORT OF:
TEST WATER SHUT-OFF		PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	\times	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ļ	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL		CHANGE PLANS	 (Other)	
(Other)			(Note: Report results Completion or Recomple	of multiple completion on Well etion 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.)*

Set OH pocker at 3865'-3880'. Frac W/20,000 gals treated water and 40,000 # 20/40 Sand. Divert W/500 # bengaic acid and 250 # rock salt w/500 # bengaic acid and 250 # rock salt mixed in 500 gala gelled water. Repeat from Stage as Stated above. Place back on production

18. I hereby certify that the foregoing is true and correct	TITLE admin. Superresor DATE 3-9-72
(This space for Federal or State office use)	
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	PART 13 19 10 10 10 10 10 10 10 10 10 10 10 10 10
*Se	ee Instructions on Reverse Side India Charles
(SGR(S) MCA(3) File	/ Districe

RECEIVED

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OIL CONSERVATION COMM.