

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRI
(Other instruction
reverse side)Form approved:
Budget Bureau No. 42-R1421

5. LEASE DESIGNATION AND SERIAL NO.

LC-157210

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME Mc. Hunt Reg.
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME MCA Unit
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M.	9. WELL NO. 115
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' E, 1/4 - 2010' E of Sec. 28, T-17S, R-32E, Lea County, New Mexico.	10. FIELD AND POOL, OR WILDCAT Mc. Hunt Reg.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3997 DS
	12. COUNTY OR PARISH Lea
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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.)*

On 11-16-70 - Rigged up to clean out, bridge,
and sand frac. this well.
Found tubing stuck. We were unable to
free. Work was not done.
Please cancel notice of intention
filed 11-10-70.

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

SIGNED

M. J. Gentry

TITLE

Ministerial Supervisor

DATE

3-31-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

4565(5) MCA(3) File

*See Instructions on Reverse Side