

(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

FORM DESIGNED BY
Budget Bureau No. 42-1112

5. LEASE DESIGNATION AND SERIAL NO.

LC 029410(b)

6. 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 ☐

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

2615' FSL and 140' FEL of Sec 30

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3913' df

12. COUNTY OR PARISH

13. STATE

Sec 30, T-17S, R-32E

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.)*

It is proposed to stimulate this well by the following procedures. Set OH packer at I 3920'. Treat w/ 3000 gals 20% HCL-NE acid. Run 2 3/8" sbg w/ csg packer and set at $\pm$ 3640'. Frac w/ 48000 gals total prod wtr and 60,000 # 20/40 sand. Divert between stages w/ 400 # benzoic acid and 200 # rock salt mixed in 400 gals gelled water. Run producing equip and plug back on production.

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

SIGNED

TITLE Administrative Supervisor

DATE

10-28-71

(This space for Federal or State office use)

APPROVED

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OCT 29 1971

USGS (5)

File

MCA(3)

*See Instructions on Reverse

J. L. GORDON
DISTRICT ENGINEER

RECEIVED

21971

OIL CONSERVATION COMM.
WASH., D. C.