

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Form Approved
Budget Order No. 12-00000
5. LEASE DESIGNATION AND SERIAL NO.
LC-029410 (2)
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 <i>MCA Unit Repr.</i>	
2. NAME OF OPERATOR <i>Continental Oil Company</i>		8. FARM OR LEASE NAME <i>MCA Unit</i>	
3. ADDRESS OF OPERATOR <i>P.O. Box 460, Dallas, T.M.</i>		9. WELL NO. <i>270</i>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>2615 'FNL + 1345' FNL of Sec. 29, T-17S R-32E, Lea Co, T.M.</i>		10. FIELD AND POOL, OR WILDCAT <i>Maj. B-SA Repr.</i>	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 29, T-17S, R-32E</i>	
15. ELEVATION: (Show whether DF, ET, CR, etc.) <i>Elev. 3949 D.J.</i>		12. COUNTY OR PARISH <i>Lea</i>	
		13. STATE <i>T.M.</i>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT ON:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☒	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <i>Commence Drilling</i> ☒	
(Other) ☐		(Note: Report results of multiple completion of 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.)*

*This well was spudded 2-13-71.
Drilled 12 1/4" hole to 740' + set 8 5/8" 20#
Condition "A" D+C casing at 740'.
Cemented w/ 375 pt class C cont. Cure cont.
W.O.C 24 hrs. Tested casing w/ 1000# for
30 min. Held OK.*

18. I hereby certify that the foregoing is true and correct
SIGNED *M.E. [Signature]* TITLE *Administrative Engineer* DATE *2-16-71*
(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

USGS(5) MCA(3) File

*See Instructions on Reverse Side

