

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIAL  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1421.

5. LEASE DESIGNATION AND SERIAL NO.

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*

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
*1345' FNL + 660' FFL of Sec. 33, T-17S,  
R-32E, Lea County, N.M.*

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)  
*Elev 3961.03*

7. UNIT AGREEMENT NAME  
*MCA Unit Reg.*

8. FARM OR LEASE NAME  
*MCA Unit Bty 3*

9. WELL NO.  
*275*

10. FIELD AND POOL, OR WILDCAT  
*Maj. G.A.G. Reg.*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
*Sec. 33, T-17S, R-32E*

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) *Commence Drilling* ☒

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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 4-3-71.  
Drilled 12 1/4" hole to 1005' and set 8 5/8" 20# casing. Contd w/500 lbs class 'C' cont. W.O.C. 24 hrs. Cont circ. Tested csg w/1000# for 30 min. OK.*

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

SIGNED

*McGee*

TITLE

*Administrative Assistant*

DATE

*4-6-71*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

*USGS(5) MCA(3) File*

TITLE

DATE

*McGee*

**RECEIVED**

**APR 13 1971**

**OIL CONSERVATION COMM.  
HOBBS, N. M.**