## STATES IINIT

SUBMIT IN TRIPLIC Form approved.

(May 1963)	DEPARTME	NT OF THE INTER DLOGICAL SURVEY	(Other instructions verse side)	0. E Buu	get Bureau No. 42-K1424. IGNATION AND SERIAL NO.  0 29 509 (b)
		to drill or to deepen or plug ON FOR PERMIT—" for such	ON WELLS back to a different reservoir		ALLOTTEE OR TRIBE NAME
OIL GAS WELL				7. UNIT AGRE	MCA
2. NAME OF OPERATO  Contin	R ental Oil C	ompany		8. FARM OR I	CA Unit_
3. Address of opera Box 46		ew Mexico 88	240	9. WELL NO.	11
See also space 17 At surface	below.)	19 and in accordance with an			G-SA RESAL
14. PERMIT NO.		15. ELEVATIONS (Show whether	DF, RT, GR, etc.)  S'est g	12. COUNTY	OR PARISH 13. STATE
16.	Check Appr		Nature of Notice, Repo	rt, or Other Data	
	NOTICE OF INTENTIO	N TO:		SUBSEQUENT REPORT OF	F:
TEST WATER SHO FRACTURE TREAT SHOOT OR ACIDIZ REPAIR WELL (Other)	MU	LTIPLE COMPLETE  NDON*  ANGE PLANS	WATER SHUT-OFF  FRACTURE TREATME!  SHOOTING OR ACID!Z  (Other)  (Note: Report Completion or	NT AI	A STORY OF WELL  A STORY  MINISTRAL OF WELL  MINIST
17. DESCRIBE PROPOSE proposed work nent to this wo.	or COMPLETED OPERA' If well is directional  () / ##	cosing (Clearly state all pertingly drilled, give subsurface to w/490 gr	ent details, and give pertinencations and measured and truly of the completion of the completions and measured and truly of the completion of the completions and measured and truly of the completion of the comp	et dates, including esting the vertical depths for a lineated of the state of the s	mated date of starting any il markers and zones perti-
clowed v	0/150 50 -4# f	reks clos locale pa	s c ceme sock,	TOP of	cenen
ey Sarv	ey Ø :	7600.			

18. I hereby certify that the foregoing is true and correct  Administrative Supervisor  DATE 7-17-72						
(This space for Federal or State office use)  APPROVED BY  TITLE	ACCEPTED FOR RECORD					
CONDITIONS OF APPROVAL, IF ANY:	JUL 1 9 1972					
USGS(5) FILE MCAC3) *See Instructions on Rev	erse Side HOBBS, NEW MEXICO					