Form 9-331 (May 1963)

## UNITED STATES SUBMIT IN TRIPLICATE.

Form approved.
Budget Burean No. 42-R1424

TME	OF	THE	INTEPIOR	(Other instructions verse side)	re-	
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DEPA		TEPIOR (Other Instructions verse side)	5. LEASE DESIGNATION	
SUNDRY NO	OTICES AND REPOR	TS ON WELLS	6. IF INDIAN, ALLOTT	TEE OR TRIBE NAME
Use "APP	LICATION FOR PERMIT—" for	plug back to a different reservoir such proposals.)	·.	
oit. 🔽 GAS	7. UNIT AGREEMENT			
2. NAME OF OPERATOR	8. FARM OR LEASE N	8. FARM OR LEASE NAME		
Continental Oil Com	pany		1	neit Fly
3. ADDRESS OF OPERATOR	- NM 00010		9. WELL NO.	m. r.
P. O. Box 460, Hobb	344	344 10. FIELD AND POOL, OR WILDCAT		
See also space 17 below.) At surface	•	and state reduitements.	10. FIELD AND POOL,	1
1,345' FNL cd 134	ts' FEL of Sec.	25	11. SEC, T., R., M., OF	BLK. AND
14. PERMIT NO.	15. ELEVATIONS (Show wheth		Sec. 25 T-1 12. COUNTY OR PARIS	75, R-3ZE
	4029'		12. COUNTY OR PARIS	SH 13. STATE NM
16. Chl.				HILL
NOTICE OF IN		ate Nature of Notice, Repo		
<u> </u>	[		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF FRACTURE TREAT	MULTIPLE COMPLETE	WATER SHUT-OFF	X REPAIRING	
SHOOT OR ACIDIZE	ABANDON*	FRACTURE TREATMEN SHOOTING OR ACIDIZI		
REPAIR WELL	CHANGE PLANS	(Other) Com	mercuont	X
(Other)  17. DESCRIBE PROPOSED OR COMPLETED	OPERATIONS (Allowed a state of the state of	(Note: Report Completion or	results of multiple completion Recompletion Report and Log f	orm.)
17. DESCRIBE PROPOSED OR COMPLETED proposed work, If well is directed nent to this work.) *	ectionally drilled, give subsurface	rtinent details, and give pertinen : locations and measured and true	t dates, including estimated da e vertical depths for all marke	nte of starting any ers and zones perti-
Spulled 1214 have 20 t Cag, at 1,0	le Au 8-15-73	and 0 Mel :	to 10001 cm	1 05-Y
**		aut position	7 1,047 , SM	8 78
20 Cag, at 1,0	049, and lame	nted with 50	of suche Ch	res C'
Coment. Circui	tated converid	to make	To ted in	- 10.76
# 1 0 0.	vily Comme	is mysell	. acres ca	g. win
1,000 the held ax	•		·	
•				
		•		
			·	
18. I hereby certify that the foregoing	true and correct			
SIGNED DUCK	12	Admin. Supervisor	· · ·	
	TITLE	Jupervisor	DATE 18-1	16-73
(This space for Federal or State of	omce ase)	The second		
APPROVED BY	'ANY:		DATE	
	/ <b></b>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	( e/109)	

\*See Instructions on Reverse Side