

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other Instructions on
reverse side)

Form approved,
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC 058698(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

2. NAME OF OPERATOR
Continental Oil Company

3. ADDRESS OF OPERATOR
Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
75 FSL & 1295' FWL OF Sec. 23

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3980' GR.

7. UNIT AGREEMENT NAME
MCA

8. FARM OR LEASE NAME
MCA UNIT

9. WELL NO.
349

10. FIELD AND POOL, OR WILDCAT
Moki, GSA Repress

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 23, 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:			SUBSEQUENT REPORT OF:		
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) Repair COMM. - Cancelled			
(Other) ☐		(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.) *

Approval was given to Repair Communication in the Subject Well. Shortly After the Approval the Waterflow ceased and has not resumed. Therefore this is to cancel This Project.

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

SIGNED **Bill Penlow**

TITLE **adm supervisor**

DATE **9-15-76**

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 17 1976

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

USGS(5), MCAH) File