

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C 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. See space 17 below.)
AT SURFACE: *450' FSL + 450' FWL*
AT TOP PROD. INTERVAL: *Same*
AT TOTAL DEPTH: *Same*
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
- | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <i>Set 5 1/2" Prod. CSG</i> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

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.)*

*Drld 7 7/8" hole from 900' to 4150' T.D. 4-14-78.
Ran 5 1/2" 15.5#, K-55 CSG Set at 4150'. Set DV Tool
at 2203'. Cmt'd 1st stage w/430 sx of chss "C" cmt
with additives. opened DV Tool and circ for 3 1/2 hrs.
cmt'd 2nd stage w/1500 sx of chss "C" cmt with
additives. Plug down 4-16-78. Circ. 400 sx of cmt
to surface. Rel Rig at 11:00 P.M. 4-16-78,
shut-in w/o compl. Rig.*

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *Wm. A. Butterfield* TITLE *ADMIN. SUPV.* DATE *4-17-78*

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
DATE <i>4.9.1</i>
APR 19 1978
U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO

*See Instructions on Reverse Side

USGS (5), MCA (4), File