UNITED STATES  SUBMIT IN TRIPLICATE  Office on respectively  DEPARTMENT OF THE INTERIOR verse side)  GEOLOGICAL SURVEY			
SUNDRY (Do not use this form for Use "AP)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
OIL GAS WELL OTH  2. NAME OF OPERATOR	7. UNIT AGREEMENT NAME		
Continental Oil 3. ADDRESS OF OPERATOR	8. FARM OR LEASE NAME  SEC SETCETSON July 9. WELL NO.		
P. O. Box 460,  4. Location of Well (Report locat See also space 17 below.)	10. FIELD AND POOL, OR WILDCAT		
At surface	WI, Session 3, I-200,	<b>R-363</b> , Lea Oronty,	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
New Mekico  14. Permit No.   15. Elevations (Show whether DF, RT, GR, etc.)			3:0. 3. T-208, R-36F
	3626° D.F.	•	12. COUNTY OR PARISH 13. STATE
16. Check	Appropriate Box To Indicate	Nature of Notice, Report, or	·- ·- ·- · · · · · · · · · · · · · · ·
Nomen or the same and the same			SQUENT REPORT OF:
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON® CHANGE PLANS	Completion or Recor	REPAIRING WELL  ALTERING CASING  ABANDONMENT*  IN 10 0 10 10 10 10 10 10 10 10 10 10 10 1
This well was conbelow:	overted to a water injustate $(3674^{\circ})$ 2 $3/8^{\circ}$ OD cem	ection well following	
_	injected 1144 barrels	water in 24 hrs. or	Się romas preseure.
	6-13-67. Completed 6		The control of the co
SIGNED SLASS (X	Storts TITLE	<b>9</b>	DATE 6-27-67
(This space for Federal or State	office use)	APPRO	YED IN THE RESERVE
APPROVED BY	IF ANY:	.jun 28	1967