	ITED STATES FI OF THE INTERIOR	SUBMIT IN TRIPLICATE One of dependence a re-	Form approved. Budget Enton: No. 42 RM C. LEASE DESIGNATION AND SERIAL N.
GEG GICAL SURVEY			. 1
(Do not use this form for proposals t	S AND REPORTS ON drill or to despen or plus back to N FOR PERMIT—" for such propaga		6. IF INDIAN, ALLOTTEE OR THISE NA.
OIL GAS OTHER			7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	1		8. FARM OR LEASE NAME
P. O. Box 460, Hobbs, New Location of Well (Report location clearly See also space 17 below.) At surface /980' F514 2,310' F6	and in accordance with any State	requirements.*	9. WELL NO. 10. FIELD AND POOL, OR WILDCAT 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
14. PERMIT NO. 15.	. ELEVATIONS (Show whether DF, RT, GR	, etc.)	Sec. 3 T-20S R-36 A
POTICE OF INTENTION TEST WATER SHUT-OFF PULL FRACTURE TREAT MULTI SHOOT OR ACIDIZE ABAND REPAIR WELL CHANG (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATION	OR ALTER CASING PPLE COMPLETE ON* IE PLANS NS (Clearly state all pertinent detail drilled, give subsurface locations and pertinent detail drilled, give subsurface locations and pertinent detail drilled.	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results Completion or Recomp is, and give pertinent dates and measured and true vertice	REPAIRING WELL ALTERING CASING ABANDONMENT* Sof multiple completion on Well pletion Report and Log form
Future plans for Well: Hold for p	possible Ribere	•	
Approximate date of future		Fall. 1976	licht I

NOV 5/974

*See Instructions on Reverse Side

TITLE Division Office Manager

USGS-5, Portuers ID, File

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: