

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: 330' FNL, 660' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: SAME

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☒
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
LC 031622 (X)(a)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
NMF21
8. FARM OR LEASE NAME
SANDERSON AB-14
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
MONUMENT [G-SH]
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 14, T.20S, R.36E
12. COUNTY OR PARISH LEA 13. STATE N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3575' D.F.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

IT IS PROPOSED TO ACIDIZE AND PERFORATE THE SUBJECT WELL AS FOLLOWS:

- RIG UP, KILL WELL, INSTALL BOP AND PULL PROD EGPT.
- IF NECESSARY, CLEAN OUT SAND FILL TO 3792'
- SPOT 50 GALS 15% NE-HCl ACID FROM 3792' TO 3750'
- PERFORATE FROM 3755'-67' AND 3773'-90' W/ 1 JSPP
- CLEAN OUT AFTER PERFORATING
- RUN PROD. EGPT AND PLACE WELL ON PRODUCTION

RECEIVED

AUG 3 1978

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO
Set @ _____ Ft.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Wm. A. Butterfield TITLE ADMINISTRATIVE SUPERVISOR DATE 8-1-78

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

*See Instructions on Reverse Side

APPROVED
AUG 3 1978
A. G. L.
ACTING DISTRICT ENGINEER

RECEIVED

198 81978

CIL CONSERVATION COMM,
HOUSTON, TX

APPROVED