

(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR

(Other instructions on reverse side)

Budget Bureau No. 42-R1424

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 "APPLICATION FOR PERMIT" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

LC-030143 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Reed B

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Summit, Yates
Lower Permian

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 23, T-20S, R-36E

12. COUNTY OR PARISH

Rea

13. STATE

NM

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)

At surface

660' FSL & 660' FWL 17 Sec. 23

14. PERMIT NO.

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

3590' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(Other) ☒

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.)*

Status of Well: *Shut in*

Approximate date that temp. aban. commenced: *9-1-70*

Reason for temp. aban.: *Uneconomic*

Future plans for Well: *Holding for secondary recovery operations.*

This approval of temporary abandonment expires *Dec 4/1975*

Approximate date of future W. O. or plugging: *Fall, 1976*

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

SIGNED *Robert G. Hall*

TITLE *Division Office Manager*

DATE *10/30/74*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

USGS-5, NMFK-A, File

*See Instructions on Reverse Side

NOV 6 1974
Jim Lind
ACTING DISTRICT ENGINEER