

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYPERMIT IN TRIPLICATE  
(Other instructions on reverse side)Form approved,  
Budget Bureau No. 42-R1424.

## 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.)

|                                                                                                                                                                           |                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <i>Injection Well</i>                                    | 6. LEASE DESIGNATION AND SERIAL NO.<br><i>CC 031741 (b)</i>                      |
| 2. NAME OF OPERATOR<br><i>Continental Oil Company</i>                                                                                                                     | 7. IF INDIAN, ALLOTTEE OR TRIBE NAME<br><i>NM-2512</i>                           |
| 3. ADDRESS OF OPERATOR<br><i>P. O. Box 460, Hobbs, New Mexico 88240</i>                                                                                                   | 7. UNIT AGREEMENT NAME<br><i>Southeast Monument Unit</i>                         |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br><i>1980 FN &amp; EL Sec. 13</i> | 8. FARM OR LEASE NAME<br><i>Sema Pecan</i>                                       |
| 14. PERMIT NO.                                                                                                                                                            | 9. WELL NO.<br><i>79</i>                                                         |
| 15. ELEVATIONS (Show whether DF, RT, CR, etc.)<br><i>3564 DF</i>                                                                                                          | 10. FIELD AND TOOL, OR WILDCAT<br><i>Stamps Grayburg</i>                         |
|                                                                                                                                                                           | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br><i>Sec. 13, T-20S, R-37E</i> |
|                                                                                                                                                                           | 12. COUNTY OR PARISH<br><i>Lea</i>                                               |
|                                                                                                                                                                           | 13. STATE<br><i>NM</i>                                                           |

## 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) *Shut-In*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\* ☐

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: *Temporary Shut-In*Approximate date that temp. aban. commenced: *9-23-76*Reason for temp. aban.: *By Order of NMOC due To Water flow Problem*Future plans for well: *Waiting on NMOC Ruling*This approval of temporary **APR 1 1978**  
abandonment expires \_\_\_\_\_Approximate date of future W. O. or plugging: *Indefinite*

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

SIGNED *B. Dillman*TITLE *S. Staff Asst*DATE *4-14-77*

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

**APPROVED**

DATE

**APR 14 1977**

BERNARD MOROZ

ACTING DISTRICT ENGINEER

USGS (5) FILE *Nmfw (4)*

\*See Instructions on Reverse Side

RECEIVED

APR 2 1977

CHIEF OF POLICE COMM.  
HOBBS, N.H.

CEVONTRA