

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions
verse side)

NM 957616
Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-037620(b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460 Hobbs, New Mexico

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

At surface

660' FSL and 1980' FWL of Sec 13

14. PERMIT NO.

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

3554' df

7. UNIT AGREEMENT NAME

8. FIRM OR LEASE NAME

9. WELL NO.

42

10. FIELD AND POOL, OR WILDCAT

Skaggs Grayburg

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

Sec 13, T-20S, R-37E

12. COUNTY OR PARISH

Lea

13. STATE

N. Mexico

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) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

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

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.)*

Set OH packer at $\pm 3700'$. Treat w/ 30,000 gals treated produced water and 69,000 # 20/40 Sand.

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

SIGNED

Robert Paul

TITLE

Admin. Supervisor

DATE

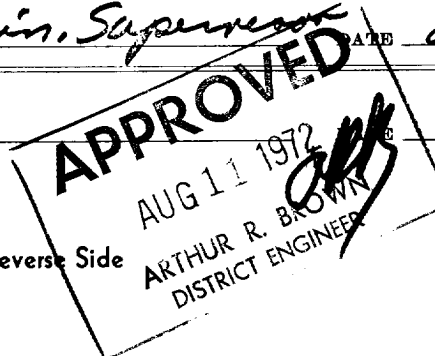
8-10-72

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

USGS(5) NMFU(4) File

RECEIVED

AUG 15 1972

OIL CONSERVATION COMM.
HOBBS, N. M.