

(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

OTHER INSTRUCTIONS ON REVERSE SIDE

LEASE DESIGNATION AND SERIAL NO.
LC 031621 (C6)

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 ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME Brett B-18
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL and 660' FWL of Sec 18	10. FIELD AND POOL, OR WILDCAT Blinkey et al
14. PERMIT NO.	11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec 18, T-20S, R-37E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3581' df	12. COUNTY OR PARISH 13. STATE Lea N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACATURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACATURE 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 on 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.)

Perf 5 1/2" csg w/ 1 1/2" spf at 3496', 3505', 3520', 3528', 3540', 3552', 3578', 3612', 3626', 3644', 3651' and 3656'. Set pki at 3565'. Treat perf 3656' - 3598' w/ 2500 gals 1590 HCL-NE acid at 3-4 BPM. Set pki at 3420'. Treat perf 3552' - 3496' w/ 2500 gals 1590 HCL-NE acid at 3-4 BPM.

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

SIGNED

TITLE Administrative Supervisor

DATE

10-4-71

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

USGS (5) File

WMFU(4)

*See Instructions on Reverse Side

APPROVED

OCT 6 1971

ARTHUR R. BROWN
DISTRICT ENGINEER