| Form 9-331 (May 1963) | UNITED STATES DEPARTMENT F THE INTERI GEOLOGICAL SURVEY | OR verse side) | Form approved. Budget Bureau No. 42-R1424. LEASE DESIGNATION AND SERIAL NO. LC -03/64/6/ |
|-----------------------------|---|-------------------------------|---|
| | UNDRY NOTICES AND REPORTS (this form for proposals to drill or to deepen or plug b Use "APPLICATION FOR PERMIT—" for such pi | ack to a different reservoir. | 6. IF INDIAN, ALLOTTER OR TRIBE NAME |
| OIL GA | S CLL OTHER | | 7. UNIT AGREEMENT NAME Note: 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. |
| 2. NAME OF OPERATE CONTINES | NTAL OIL COMPANY | 2.7 | 8. FARM OR LEASE NAME BRITT B-18 |
| P. O. Box | 460, Hobbs, N.M. 88240 | | 9. WELL NO. |
| See also space 1 | (Report location clearly and in accordance with any 7 below.) SL & 660 FE C Sec. | | 10. FIELD AND POOL, OR WILDCAT ELEMBAT QUEON GAS 11. SEC., T., E., M., OR BLE. AND SURVEY OR AREA SEC. 18, T-105, R-376 |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF 3 555) | | 12. COUNTY OR PARISH 13. STATE LEA UM |
| 16. | Check Appropriate Box To Indicate N | • • • | UENT REPORT OF: |
| TEST WATER SH | UUT-OPP PULL OR ALTER CASING | WATER SHUT-OFF | REPAIRING WELL |

(Other)

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

17. Describe 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.)

FRACTURE TREATMENT

(Other)

SHOOTING OR ACIDIZING

ALTERING CASING

CABANDONMENT*

Subsect Well WAS RETURNED TO producing STATUS 8-18-77.

ABANDON*

CHANGE PLANS

FRACTURE TREAT

REPAIR WELL

SHOOT OR ACIDIZE

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

SIGNED AND THE STATIST SUPERISON DATE

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

USGS (5) WM full) Sile

*See Instructions on Reverse Side OGICAL SURVEY
NEW MEXICO

OIL CONSERVATION COMM.