Form 9-331 +May 1963)

## UN'FD STATES SUBMIT IN TRIPL OF THE INTERIOR (Other instruction) reverse side) SUBMIT IN TRIPL TE Budget Bureau No. 42-R1424. 5. Lease Designation and Serial No. DEPARTME:

2. SAME OF OPERATOR CONTINENTAL CIL COMPANY 3. ADDRESS OF OPERATOR P. O. BOX 460, Hobbs, N.M. 88240 1. FROTTON OF REAL PROMPT Inestition clearly and its accordance with any State requirements.  AT SHAPE TO Hobbs, AT SHAPE SHAPE IN THE CONTINENT IN THE ADDRESS CONTINENT IN THE C	DEI	GEOLOGICAL SURVEY	ATO A Control State)	LC 03/670(a)
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