NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No. B-1536

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 —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator: Continental Oil Company

8. Farm or Lease Name: State E

3. Address of Operator: Box 460, Hobbs, N.M. 88240

9. Well No. 9

4. Location of Well: UNIT LETTER E, 1980 FEET FROM THE NORTH LINE AND 660 FEET FROM THE WEST LINE, SECTION 16 TOWNSHIP 22S RANGE 36E NMPM.

10. Field and Pool, or Wildcat: Eunice Seven Rivers Queen

15. Elevation (*Show whether DF, RT, GR, etc.*): 3568' GR

12. County: LEA

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK [ ]
- TEMPORARILY ABANDON [ ]
- PULL OR ALTER CASING [ ]
- PLUG AND ABANDON [ ]
- CHANGE PLANS [ ]
- OTHER [ ]

SUBSEQUENT REPORT OF:

- REMEDIAL WORK [X]
- COMMENCE DRILLING OPNS. [ ]
- CASING TEST AND CEMENT JOB [ ]
- ALTERING CASING [ ]
- PLUG AND ABANDONMENT [ ]
- OTHER [ ]

17. Describe Proposed or Completed Operations (*Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work*) SEE RULE 1103.

Pulled rods and pump. Pulled 3810' Tbg. Ran sand pump and cleaned out OH to 3820'. Ran log. Ran 5½" Treating packer. Pkr. set at 3641'. Treated OH section w/1500 gals 15% NE/HCL acid. Flushed w/20 bbls. treated fresh water. Swabbed, ran production equipment.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED W. A. Tomlinson TITLE Admin. Supv. DATE 5-25-77

APPROVED BY Orig. Signed by Jerry Sexton TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: NMOCC (4), File (2)