

NEW MEXICO OIL CONSERVATION COMMISSION

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/> PATENT	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Continental Oil Company
3. Address of Operator P. O. Box 460 Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER <u>H</u> <u>1980'</u> FEET FROM THE <u>NORTH</u> LINE AND <u>330</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>21</u> TOWNSHIP <u>22-S</u> RANGE <u>36-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <u>3527' DF</u>

7. Unit Agreement Name <u>SOUTH EUNICE UNIT</u>
8. Farm or Lease Name <u>SOUTH EUNICE UNIT</u>
9. Well No. <u>11</u>
10. Field and Pool, or Wildcat <u>SO. EUNICE 7-RIVERS QUEEN</u>
12. County <u>LEA</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JQS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Set pkr. @ 3656'. Treated perts. 3723'-3832' w/500 gals. 15% acid. Frac w/4000 gals treated gelled wtr pad, then 20,000 gals treated fresh wtr., 40,000# sand. Swabbed & re-ran prod. egpt. Work started 12-8-75, completed 12-11-75. Test before: 0 oil, 1 BW, 0 Gas in 24 hrs. Test After: Pmpd 30 BO, 26 BW, No Gas in 24 hrs.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>[Signature]</u>	TITLE <u>SR. ANALYST</u>	DATE <u>1-7-76</u>
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		