

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease
State **PATENTED**

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"/>	7. Unit Agreement Name SOUTH EUNICE UNIT
2. Name of Operator Continental Oil Company	8. Farm or Lease Name SOUTH EUNICE UNIT
3. Address of Operator P. O. Box 460 Hobbs, New Mexico 88240	9. Well No. 11
4. Location of Well UNIT LETTER H 1980' FEET FROM THE NORTH LINE AND 330' FEET FROM THE EAST LINE, SECTION 21 TOWNSHIP 22-S RANGE 36-E NMPM. 10. Field and Pool, or Wildcat EUNICE 7-RIVERS GREEN S	
15. Elevation (Show whether DF, RT, GR, etc.) 3527' DF	12. County LEA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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 JOBS <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.

*It is proposed to stimulate this well by the following procedure:
Set Ret. Plcr. @ 3660'. Treat w/500 gal. 15% Acid. Trac w/4000
gals. trtd. fresh wtr. w/ 200# "ADOMITE AQUA" & 160# Guar (Gel).
Pump 20,000 gals. trtd. fresh wtr w/500# "ADOMITE AQUA", 800#
Guar (Gel) & 40,000# sd. clean out & return to production.*

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

SIGNED *[Signature]* TITLE *SR. ANALYST* DATE *11-26-75*

APPROVED BY _____ TITLE _____ DATE _____