

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPL  
(Other instructions  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 031621 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER Dual

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1650' FNL & 660' FEL of Sec. 15, T-20S, R-37E,  
Lea County, New Mexico, NMPM.

7. UNIT AGREEMENT NAME

SEMU

8. FARM OR LEASE NAME

SEMU Blinebry-Tubb

9. WELL NO.

85

10. FIELD AND POOL, OR WILDCAT

NMPU Field

Mon Tubb & Weir Bline-

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

dry Pools

15-20-37

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3578 DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

SUBSEQUENT REPORT OF:

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any 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.)\*

Drilled to 6700' 10-6-64. Set 5 1/2" casing at 6700' W/600  
sx class "C" cement W/8% gel and 100 sx class "C" cement  
W/4% gel. Plug down at 2:45 am 10-8-64. Top of cement at 2600'  
by temperature survey. W.O.C. 36 hrs. Tested with 1000 lbs.  
for 30 min. Tested O.K.

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

SIGNED ROBERT CAULFIELD

TITLE Staff Supervisor

DATE 10-12-64

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

USGS (5) NMOCC (2) JM PAN AM-HOBBS (3) ATL-ROS (2) CALIF HOU & MID (1 EA)

\*See Instructions on Reverse Side

J. L. G. 10-12-64  
ACTING DISTRICT ENGINEER