

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

3. LEASE DESIGNATION AND SERIAL NO.

LC - 031621 (6)

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 ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME Britt B
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, NM 88240	9. WELL NO. 22
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL + 990' FSL of Sec 10	10. FIELD AND POOL, OR WILDCAT Monument Table
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3584' GR
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 10, T-20S, R-37E
	12. COUNTY OR PARISH Lea
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PUMP OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

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

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.)*

It is proposed to perf & treat this well by the following procedures. Work to commence upon approval.

Run cement bond log & squeeze with cement if necessary. Perf with 1 jet shot per ft from 6498' to 6645'. Selectively treat with 3,700 gals of 15% acid and 1200 gals of 28% acid. Place well on Prod.

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

SIGNED

TITLE Admin. Supervisor

DATE

9-28-73

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

OCT 1 1973

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side