Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC 031736 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL ☒ GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME: N/A

2. NAME OF OPERATOR: Continental Oil Company

8. FARM OR LEASE NAME: S. F. Wells Comm.

3. ADDRESS OF OPERATOR: P. O. Box 460, Hobbs, New Mexico 88240

9. WELL NO.: 90

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 660' FSL & 1FEL, of Sec. 22, T-20S, R-37E, Lea Co. County, N. Mex.

10. FIELD AND POOL, OR WILDCAT: Drinkard/Abo Pool

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: L, Sec 22 T-20S R-37E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3437' DF

12. COUNTY OR PARISH: Lea

13. STATE: N. Mex.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☒	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐				
(Other)				(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.)*

Drilled 12¼" hole to 3710'. Ran 9⅝" OD, J-55, ST&C, Casing and set casing @ 3710'. Cemented with 1,000 sacks Lwc with 10% gilsonite plus 100 sacks of Class C cement mixed with 2% CC. Temp. survey indicated top of cement at 90' from surface. Tested casing with 1,000 PSI for 30 minutes. Tested OK.

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

SIGNED M. C. Dooley TITLE Administrative Section Chief DATE 12-19-68

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
DEC 20 1968
J. L. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side