

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions re-
verse 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 13126
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSC & 660' FEL of Sec. 23	8. FARM OR LEASE NAME MEYER B-23
	9. WELL NO. 5
	10. FIELD AND POOL, OR WILDCAT SOUTH LUNICE SEVEN RIVERS QUEEN
	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 23, T-22S, R-36E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3481' GR
	12. COUNTY OR PARISH LEA
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL 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) **SET PROD. CSG.** ☒

(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.)*

SET 5 1/2" 15.5# Casing @ 3850'. Cemented w/300 sks
Cement. Plug Down 10-13-74. Top of Cmt @ 2400'.
PBD 3770'.

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

SIGNED [Signature]TITLE SR. ANALYSTDATE 10-14-74

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

DATE
ACCEPTED FOR RECORD

OCT 16 1974

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGS-5, NMFU-4, File

*See Instructions on Reverse Side