

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

5. 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

2. NAME OF OPERATOR

CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR

Box 460, HOBBS, N.M. 88240

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

660' FNL & 1980' FWL OF SEC. 15

14. PERMIT NO.

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

4309' GR. (EST.)

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

BRITT "B"

9. WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

EUNION GAS

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

Sec. 15, T. 20S, R. 37E

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

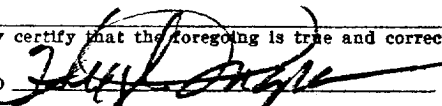
ABANDONMENT*

(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 perti-
nent to this work.)*

Drilled to TD 3775'. Set 5 1/2" 14# K-55 csq.
@ 3772'. Cemented w/275 sks. Class 'C' cmt. Plug
down 3-7-75. Top of cmt @ 1800'. WOC 48 Hrs.
Tested csq. to 1,000#, held OK.

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

SIGNED



TITLE

SR. ANALYST

DATE

3-12-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

MAR 14 1975

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGS/S, NMFU-4, File

*See Instructions on Reverse Side