

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY		8. FARM OR LEASE NAME SEMU PENN	
3. ADDRESS OF OPERATOR Box 460, HOBBS, N.M. 88240		9. WELL NO. 96	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FSL & 990' FEL OF SEC. 23		10. FIELD AND POOL OR WILDCAT CASS PENN	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 23, T. 20S, R. 37E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3532' DF		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:		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) SET INTERMEDIATE 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.)*

Drilled 12 1/4" hole from 498' to 4197'. Set 8 5/8" K-55 32# csq. Cemented 1st stage w/1000 sks. Class "C" cmt w/ DV Tool @ 2600'. Cemented 2nd stage w/2000 sks Class "C" cmt. Cmt. Circ to ste. Plug down 8.31.75. Woc 24 hrs. Tested csq w/1000 # for 30 min. Held ok. Resumed drlg.

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

SIGNED

TITLE

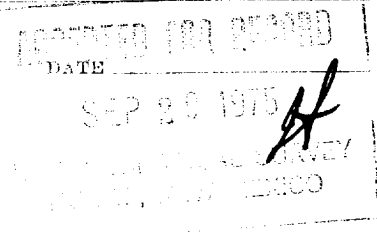
DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

USGS-5, NMPW-1, File