

COPY TO O. C. G.

Form 9-331
Dec. 1973

Form Approved
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill, to deepen or plug back to a different reservoir. Use Form 9-331-C for such purposes.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR

CONTINENTAL OIL CO.

3. ADDRESS OF OPERATOR

P.O. BOX 460 HOBBS, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1480' S 330' W

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☒ EXTEND APPROVAL X

SUBSEQUENT REPORT OF:

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U. S. GEOLOGICAL SURVEY

HOBBS, NEW MEXICO

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)*

Change of the name

WE REQUEST THE APPROVAL PERIOD TO BE EXTENDED FOR ONE YEAR FROM THE INITIAL APPROVAL OF THE APPLICATION TO DRILL THE SUBJECT WELL.

THE WELL WAS ORIGINALLY APPROVED 3-7-79

Unless Drilling Operations Have
Commenced, this drilling approval
Expires 3-7-80

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED *W. A. Butterfield* FILE ADMINISTRATIVE SUPERVISOR DATE 6-6-79

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:
USGS S

APPROVED
JUN 11 1979
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

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JUN 12 1979

OIL CONSERVATION COMM.
HONOLULU, H. I.