| Form 9–331 Dec. 1973 | Form Approved. |
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| UNITED STATES | Budget Bureau No. 42-R142 |
| DEPARTMENT OF THE INTERIOR | LC 03/670 B |
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME |
| (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.) | NMFU |
| 1. oil gas — | 8. FARM OR LEASE NAME IN aven Unit |
| well S well other | 9. WELL NO. |
| 2. NAME OF OPERATOR | 55 57 |
| Continental Oil Company 3. ADDRESS OF OPERATOR | 10. FIELD OR WILDCAT NAME Alinely - July |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 | 11. SEC., T., R., M., OR BLK. AND SURVEY O |
| below.) | \$50.21 ,T-205, R-38E |
| AT SURFACE: 640 FS1 & 660 FWC AT TOP PROD. INTERVAL: | 12. COUNTY OR PARISH 13. STATE |
| AT TOTAL DEPTH: | Lea m.m |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. | 14. API NO. |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WE |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | 35-46 GR |
| TEST WATER SHUT-OFF | |
| FRACTURE TREAT | |
| REPAIR WELL | (NOTE: Dec.) |
| PULL OR ALTER CASING | (NOTE: Report results of multiple completion or zon change on Form 9-330.) |
| CHANGE ZONES | |
| ABANDON* | |
| (other) Change well number | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent. | all pertinent details, and give pertinent dates rectionally drilled, give subsurface locations and to this work.)* |
| It is proposed to change the number | |
| 55 to 57. I his change i | |
| ander) all devices as | me refree and |
| order of drilling. I his - | |
| sperand 3-30-77 as I | Varien Whit no. 47 |
| | |
| | |
| | |
| Subsurface Safety Valve: Manu. and Type | Set @ Ft |
| 8. I hereby certify that the foregoing is true and correct | |
| IGNED WAR B. Halley III TITLE alning Sup | Date 10-16-78 |
| (This space for Federal or State office | OVED! |
| | |
| elses (5) | 1 9 1978 |
| nm Fu(4) | -NICT ENGINEER |
| TILE *See Instructions on TINE 1915 | JKIO 1 S. |
| | |