

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions reverse side)

Form Approved
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC-031740(b)
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
P. O. Box 460, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980' FSL and 1980' FWL of Sec 4

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Meyer B-4

9. WELL NO.
4

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3595' d.f.

10. FIELD AND POOL, OR WILDCAT
Ennis Monument G-5A

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 4, T-21S R-36E

12. COUNTY OR PARISH 13. STATE
Lea NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <i>Recompletion</i> <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recombination 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 CIBP @ 3700' w/ 2 SKS cm on top. Perf @ 11/5
 pf @ 3358', 69', 75', 3384', 3429', 35', 3498', 3505', 3523'
 and 3534'. Frac'd perfs w/ 20,000 gals gelled treat.
 produced water and 40,000 # 20/40 sand.
 Completed - 3-6-73*

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

SIGNED *Kenneth Gauld* TITLE *Admin. Supervisor* DATE *3-27-73*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
 CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
 APR 16 1973
 U. S. GEOLOGICAL SURVEY
 HOBBS, NEW MEXICO

*See Instructions on Reverse Side

USGS-5 FILE *NMFU-4*