Form 9-331 (May 1963)	U TED STAT	TES SUBMIT IN T	TRI TATE	form approved Budget Bureau	No. 42-R1424.	
(May 1500)	DEPARTML OF THE		ctic in re-	LEASE DESIGNATION A		
SI	INDRY NOTICES AND RE		<u> </u>	IF INDIAN, ALLOTTEE	OR TRIBE NAME	
	his form for proposals to drill or to dec Use "APPLICATION FOR PERMIT-		servoir.			
OIL GAS OTHER				7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR Continental Oil Company				8. FARM OR LEASE NAME MOLICE A-1		
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, NM 88240				WELL NO		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)				FIELD AND POOL, OR	WILDCAT	
At surface				11. SEC., T., R., M. OR BLK. AND SURVEY OR ABBA		
1980 FNL and 1980 FEL of Sec 18				Sec/8. T-Z/	IS.R-36E	
14. PERMIT NO.	15. ELEVATIONS (Sh	ow whether DF, RT, GR, etc.)	12.	COUNTY OF PARISH	18. STATE NM	
16.	Check Appropriate Box To	Indicate Nature of Notice,	Report or Other			
	NOTICE OF INTENTION TO:		SUBSEQUENT			
TEST WATER SHI	PULL OR ALTER CASIN MULTIPLE COMPLETE	WATER SHUT-		REPAIRING WE		
SHOOT OR ACIDIZ	E ABANDON*	SHOOTING OR		ABANDONMENT	one -	
(Other)	CHANGE PLANS	Complet	ion or Recompletion	nultiple completion of Report and Log form	n.)	
proposed work, nent to this wor	n or completen operations (Clearly state If well is directionally drilled, give suk.) *	ibsurface locations and measured a	nd true vertical de	pths for all markers	and zones perti-	
Dumped	pea gravel ted 5' of 19	and fil	led Co	sing I	<i>373/ .</i>	
' Co	+ 1 6' at 10	120 sond	to 321	5. ta	gged	
<i>t</i> - <i>D</i>	, ,, ,, ,		• / // /-			
ill@3	ted 5 of 19 218! Set to expanding	***************************************	taga	ed ce	ment	
			<u> </u>	1-5613	·	
0 5000	A illed of	um Cem	m 7	I DA M	K.	
t 2891.	pilled of for above 3	215 w/ 300	PS13	need of	- 23	
A A 100		フフスノ	· 170 7	100.	•	
Danel	for above 3 out fill 7 - 3689' W/5.	+ 3/5 C	7. and			
e at	- 3689 W/50	N , $\alpha X > 0 > 0$	Tod -	6-21-	73.	
weng -		V. al 363 a Comple	le o		,	
produce	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
18. I hereby certify t	that the ofegoing is try and correct	TITLE Admin. Supervi	sor	DATE 6-Z	2-8-73	
	relieval or State office (se)	TILDR	To a second	DAID 15		
APPROVED BY	V V	TITLE	A Company	DATE		

*See Instructions on Reverse Side

USGS-5 FILE NMFU-4