

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C 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, N.M. 88240

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

AT SURFACE: 660' ANL § 1980 FGL.

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)

SUBSEQUENT REPORT OF:

RECEIVED

MAY 14 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5. LEASE

LC 031740 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMEL

8. FARM OR LEASE NAME

MEYER A-1

9. WELL NO.

6

10. FIELD OR WILDCAT NAME

Emmons Gates TRUBS QW (GAS)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC 18 T 21 S R 36 E

12. COUNTY OR PARISH

LEA

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

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.)*

It is proposed to perf the Gates formation to increase gas prod. as follows:

MIRU, pull prod. 29 pt.

spot 210 gals 15% HCl-Nc acid 3185'-3000'

perf @ 3034, 42, 54, 59, 73, 3110, 3138, 46, 58, 64 w/ 1 SSP.

acidize w/ 2500 gals 15% HCl-Nc acid.

if place well on test, if test over 400 MCF/D place well on prod.

if test less than 400 MCF/D fracture treat given w/ CO₂ foam.

total frac. 8000 gals. CO₂ + 32 gals frac fluid + 64,500 20/40 sd.

swab in. place on prod.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED John A. Butterfield TITLE Admin. Supv DATE 5-10-79

(This space for Federal or State office use)

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

USGS 5

NMFO 4

7:12

*See Instructions on Reverse Side

APPROVED

MAY 14 1979

ACTING DISTRICT ENGINEER