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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
**B-1533 1/2**

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>Continental Oil Company</b>	8. Farm or Lease Name <b>State C-20</b>
3. Address of Operator <b>Box 460, Hobbs, N.M. 88240</b>	9. Well No. <b>6</b>
4. Location of Well UNIT LETTER <b>C</b> <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>20</b> TOWNSHIP <b>21S</b> RANGE <b>36E</b> NMPM.	10. Field and Pool, or Wildcat <b>Eumant Queen Gas Pool</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3638' DF</b>	12. County <b>LEA</b>

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

8-23-76 Killed well w/ 200 gal. 7 1/2% NE-HCL Acid.  
POOH w/equipment. Perf 3257'-59', 78', 80', 3469', 71', 98',  
3500', 3604', 08', 3612' w/ 1 shot per interval.  
8-25-76 Treated 7 Rivers + Queen zones w/ 1200 gal. 7 1/2%  
NE-HCL. Fractured w/ 10000 gallon gelled water,  
10000 gal. CO<sub>2</sub> + 36000 # 20/40 sand.  
Flushed w/ 50-50 TFW + CO<sub>2</sub>  
8-26-76 Frac'd Yates perms w/ 10000 gal. gelled water,  
10000 gal. CO<sub>2</sub>, 36000 # 20/40 sand. Recovered load  
8-27-76 Installed wellhead  
8-28-76 Tested.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Wm. A. Butterfield TITLE Admin. Supv. DATE 5/18/77

APPROVED BY Jerry Sexton TITLE Dist. 1. Supv. DATE

CONDITIONS OF APPROVAL, IF ANY: None (4), File

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MAY 21 1977

U.S. CONSTITUTIONAL COMM.  
1958, 1960