

(May 1963)

DEPARTMENT OF THE INTERIOR

(Other instructions on reverse side)

Budget Bureau No. 42-R1424

GEC ICAL 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 "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME Hank B-3
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO. 23
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL & 560' FEL of Sec. 4	10. FIELD AND POOL, OR WILDCAT Blindly Oil & Gas
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3483' DF
	11. SEC., T., R., & OR BLK. AND SURVEY OR AREA Sec. 4, T-21S, R-37E
	12. COUNTY OR PARISH Roa
	13. STATE 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

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion 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.)*

Status of Well: *Shut in*

Approximate date that temp. aban. commenced: *12-1-71*

Reason for temp. aban.: *Uneconomical*

Future plans for Well:

Holding for secondary recovery

Approximate date of future W. O. or plugging: *Fall 1976*

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

SIGNED *Robert L. Smith*

TITLE *Division Office Manager*

DATE *10/30/74*

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

NOV 6 1974

Jim Sims
JIM SIMS
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS-5, NMEL-4, File