

UNITED STATES
DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☐DEEPEN ☒PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☒GAS
WELL ☐OTHER ☐SINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460, Hobbs NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

660' FNL & 1980' FWL OF SEC. 3

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drilg. unit line, if any)

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3497' DF

16. NO. OF ACRES IN LEASE

440

19. PROPOSED DEPTH

6920'

17. NO. OF ACRES ASSIGNED

TO THIS WELL

40

20. ROTARY OR CABLE TOOLS

Rotary

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
4 3/4"	4" OD LINER	10.46#	6920'	35 SX

The Hawk B-3 No. 16 was completed in the Blinney Formation on 11-11-56 and shut-in in December, 1971 after recovering 110,764 BO. IT IS PROPOSED TO DEEPEN 440' and Recomplete in the Drinkard Formation as follows:

Set CMT Retainer A ± 5700' and Squeeze the Blinney Pits 5770'-5956' w/150 SX Class "C" CMT and Pressure Test to 1000 PSI. Drill out CMT Plug From 6300'-6480' and Drill New Hole to 6920' TD. Set 480' 4" OD Liner From 6440' to TD & CMT w/35 SX Class "C" CMT. Drill out to TOP OF LINER & Pressure Test to 750 PSI. Make Bit Trip Through Liner. Anticipate Drinkard will be Perforated with 8-10 Shots and Treated w/400000 - 240000 Gal. Sand. Wt. Frac.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

W. A. Butcher

TITLE

ADMIN. SUPER.

DATE

12-30-76

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JAN 5 1977

BERNARD MOROZ

DISTRICT ENGINEER

USGS-5, NMFU Partners (4), File

*See Instructions On Reverse Side

RECEIVED

JAN 11 1977

OIL CONSERVATION COMM.
HOBBS, N. M.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instruction on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

Nm 2512
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, New Mexico 88240
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FNL & 1980' FWL

7. UNIT AGREEMENT NAME

Nm fu
8. FARM OR LEASE NAME

Hawk B.3
9. WELL NO.

16
10. FIELD AND POOL, OR WILDCAT

Blueberry Oil & Gas
11. SEC., T., R./M., OR BLK. AND SURVEY OR AREA

Sec. 3, T. 21S, R. 37E
12. COUNTY OR PARISH 13. STATE

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.)
3497' DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☒
(Other) *Shut In*

(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:

Hold for secondary recovery

This approval of temporary abandonment expires **DEC 1 1976**

Approximate date of future W. O. or plugging: *Indefinite*

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

SIGNED *A. P. Delmonico* TITLE *Asst. Staff Asst* DATE *12-1-75*

(This space for Federal or State office use)

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

USGS (5) Nm fu (4) file

*See Instructions on Reverse Side

