

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-031741 (b)

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.)

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

Hawk B-1

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

NMFU Field

Drinkard Pool

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

Sec. 8, T-21S, R-37E

12. COUNTY OR PARISH 13. STATE

Lea

N.M.

1. OIL
WELL ☒ GAS
WELL ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 460, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

1980' FSL & 660' FEL of Sec. 8, T-21S,
R-37E, Lea County, New Mexico, NMPM.

14. PERMIT NO.

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

3538 DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Squ. & Reperf ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐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 perti-
nent to this work.)*

Subject well was squeezed and reperfed using the following procedure:

Before workover - TD 6775, DOD 6770. DF 10' AGL. DF elev 3538. Csg. pt 7" @ 6774. Pay - Drinkard 6638-6734. Perf 6638-70, 6675-80, 6690-6706, 6714, 6720, 6726-36 W/4 JSPF. Latest test dated 11-28-64, flwd 3 BO, No wtr in 2 hrs W/29 MCFGPD on 27/64 Chk. CP Pkr. Gor 9667. Work Done - Squ Drinkard perfs 6638-6736 W/200 sx class C cmt. Drld out cmt 6538-6646 Perf Drinkard @ 6539, 6546, 6554, 6566, 6572, 6594, 6608, 6619, 6629 W/1 JSPF. Ran 3 1/2 tbg W/pkr. Acidized 6539-6629, W/2,000 gals. Sand - fraced Interval 6539-6629 W/40,000 gals crude, 20,000# Sd and 2000# "ADOMITE" Additives. After workover - No change in TD, PBD, DF AGL, DF Elev, csg pt or pay. IP Flwd 336 Bbls 39 Deg gravity oil, no wtr in 24 hrs W/446 MCFGPD on 20/64 chk. CP Pkr, TP 500#. GOR 1327. Workover started 1-27-65, completed 2-2-65. Date tested 2-2-65.

APPROVED

MAR 3 1965

J. L. GORDON
ACTING DISTRICT ENGINEER

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

SIGNED SIGNED: ROBERT CAULT IIITITLE Staff SupervisorDATE 3-1-65

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, NMOCC-2, JM PAN AM HOBBS-3, ATL ROS-2, CALIF Hous. & Mid. - 1 each

*See Instructions on Reverse Side