

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse side)

Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 2512

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hank B-10

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Wanta Gls

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

Sec. 10, T-21S R-37E

12. COUNTY OR PARISH

16. STATE

Lin

NM

## 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

2310' FNL &amp; 2310' FWL of SEC. 10

14. PERMIT NO.

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

3452' 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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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: *Temporarily Abandoned*Approximate date that temp. aban. commenced: *2-1-71*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 Gault, III*

TITLE

Division Office Manager

DATE

*10/30/79*

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, NMFL-4, File

\*See Instructions on Reverse Side

NOV 6 1979  
JIM SIMS  
ACTING DISTRICT ENGINEER