

OIL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to deep or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. <i>Nm 2512</i>
2. NAME OF OPERATOR <i>Continental Oil Company</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>P. O. Box 460, Hobbs, New Mexico 88240</i>		7. UNIT AGREEMENT NAME <i>Nm fu</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <i>At surface</i> <i>810' FSL & 660' FEL</i>		8. FARM OR LEASE NAME <i>Hawk B.3</i>
14. PERMIT NO.		9. WELL NO. <i>6</i>
15. ELEVATIONS (Show whether DE, RT, GR, etc.) <i>3464' DF</i>		10. FIELD AND POOL, OR WILDCAT <i>Paddock</i>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec 3, T.21S, R.37E</i>
		12. COUNTY OR PARISH <i>Lea</i>
		13. STATE <i>Nm</i>

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) *Shut In*

(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: *11-6-63*Reason for temp. aban.: *uneconomical*

Future plans for well:

*Holding 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. D. Sullivan*TITLE *Asst. Staff Asst*DATE *12-1-75*

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

JAN 13 1976

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGS(5)/Nm fu(4) file

*See Instructions on Reverse Side