

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved
Budget Bureau No. 45-BUC

2. LEASE DESIGNATION AND SERIAL NO.
LC-032096 (b)

3. IF INDICATED, ALLOTTEE OR TRACT 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
1980' FNL and 1980' FNL, Sec. 11, T-21S, R37E, Lea County, N. Mex.

14. PERMIT NO.

15. ELEVATIONS (Show whether DT, RT, GR, etc.)
3446' DF

7. UNIT AGREEMENT NAME

8. FIRM OR LEASE NAME
Lockhart B-11

9. WELL NO.
16

10. FIELD AND POOL, OR WILDCAT
Drinkard, Blinobry, Abo

11. SEC., T., R., M., CH. 1/4, AND SURVEY OR AREA
Sec. 11, T-21S, R37E

12. COUNTY OR PARISH
Lea

13. STATE
N. Mex.

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 COMPLETION

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 COMPLETE 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.)

It is proposed to set a tubing plug in the 2 3/8" Drinkard string at 6474' and open the PSI sliding sleeve at 6470' to produce the Blinobry zone.

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

SIGNED

TITLE **Adm. Section Chief**

DATE **6-2-70**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

USGS-5 FILE

NMFU - Putnam

APPROVED

JUN 4 1970

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side