Form 9-331 (May 1963)	UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other Instructions on re-				Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESCENATION AND SERIAL NO.	
	GE', ICAL SURVEY				LC-032096(b)	
Sl (Do not use t	JNDRY NOTICE: this form for proposals to Use "APPLICATION"	S AND REPORTS Condition of the bound of the	ON WELLS ack to a different reservoir.	6. IF INDIAN, ALLOTTE	E OR TRIBE NAME	
OIL K GAS WELL				7. UNIT AGREEMENT N	AME	
2. NAME OF OPERATO		<u> </u>	Mini	8. FARM OR LEASE NA	ME	
Continenta	1 Oil Company		No.	Lookhat 1	8-12	
3. ADDRESS OF OPERA	TOR	V. \		9. WELL NO.		
P. O. Box	460, Hobbs, Nev	w Mexico 88240 ^t	le de la companya de	2		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface				10. FIELD AND POOL, (10. FIELD AND POOL, OR WILDCAT	
				Have Sim	neson	
.				11. SEC., T., R., M., OR SURVEY OR ARE	BLK. AND	
330' FA	12 a 810'	FWL of Sec.	12		•	
		·		522. /2 7. Z. 12. COUNTY OR PARISE	15 R-37E	
14. PERMIT NO.	15	ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISI	1	
		3480'D.	E	Koa	NM	
16.	Charle Annua	nucto Roy To Indicate N	-ture of Notice Dancis or	Other Date		
	Check Appro	buate pox to tualcate 14	ature of Notice, Report, or			
	NOTICE OF INTENTION	то:	SUBSEC	QUENT REPORT OF:		
TEST WATER SHU	T-OFF PULL	OR ALTER CASING	WATER SHUT-OF#	RÉPAIRING	WELL	
FRACTURE TREAT	MULT	IPLE COMPLETE	FRACTURE TREATMENT	ALTERING O	:ASING	
SHOOT OR ACIDIZE	ABANI	оом•	SHOOTING OR ACIDIZING	ABANDONME	NT*	
REPAIR WELL	CHAN	GE PLANS	(Other) Seart	du		
(Other)			(Note: Report result	ts of multiple completion pletion Report and Log fo	on Well	
Approximate Reason for	Well: Shart - e date that tem temp. aban.:	mp. aban. commence	d: 2-1-72			
·	Holding &	for secondon	grecovery			
				* * * * * * * * * * * * * * * * * * *		
	•		·			
		75.		•		
		to A tagent A - State S	en en engel en en grand Dec	41975		
	e date of futur	re W. O. or pluggin	ng: Fall 197	' 6		
SIGNED 6	it Fult		ision Office Manager	DATE	130/74	
(This space for F	ederal or State office use	e) .				
APPROVED BY _		TITLE		APPROVED	ARROVED	
CONDITIONS OF	APPROVAL, IF ANY:					
				NOX . 6 /1997	4	
		*See Instructions	on Reverse Side	JAN SINE	*** **********************************	

ACTING DISTRICT ENGINEER