

UNIT STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE  
(Other instructions on  
reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-2512

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.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

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' FSL + 660' FWL OF SECTION 9

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

HAWK B-1

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

BLINEBRY GAS

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

SEC. 9, T-215, R-37E

14. PERMIT NO.

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

3522' DF

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 COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) WELL STATUS CHANGE ☒  
(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 pertinent to this work.)\*

THIS WELL WAS RECLASSIFIED FROM OIL TO GAS  
EFFECTIVE 1-1-72 BY THE N.M.O.C.C. THIS WELL  
WAS CONNECTED TO EL PASO'S GATHERING SYSTEM  
ON FEBRUARY 1, 1972.

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

SIGNED

Administrative Supervisor

DATE

2-3-72

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

USGS(5) FILE

ACCEPTED FOR RECORD

JUL 12 1972

U. S. GEOLOGICAL SURVEY  
Side HOBBS, NEW MEXICO

\*See Instructions on Reverse