

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
 Continental Oil Company

3. ADDRESS OF OPERATOR
 P.O. Box 460, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
 At surface 660' FNL & 660' FWL Section 9, T-21S, R-37E B
 At proposed prod. zone Lea County, New Mexico, NMPM.

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 Same
 5 Mi NW of Eunice, N.M.

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
 900' SW of Lease Line

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED TO THIS WELL
 40

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
 1200' West

19. PROPOSED DEPTH
 6870

20. ROTARY OR CABLE TOOLS
 Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 3555 GR (Est)

22. APPROX. DATE WORK WILL START*
 4-3-65

5. LEASE DESIGNATION AND SERIAL NO.
 LC 031741 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
 NMFU

8. FARM OR LEASE NAME
 Hawk A

9. WELL NO.
 5

10. FIELD AND POOL, OR WILDCAT
 NMFU Field

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 Blinebry-Drinkard Pools
 9-21S-37E

12. COUNTY OR PARISH
 Lea

13. STATE
 N.M.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11	8 5/8"	24	1400	380 sx Class "C"
7 7/8"	5 1/2"	14	6870	530 sx Class "C"

It is proposed to drill to 6870' and attempt to dual complete in the Blinebry and Drinkard Oil Pools.

Your approval of the above work is requested.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED SIGNED: ROBERT GAULT III TITLE Staff Supervisor DATE 3-26-65

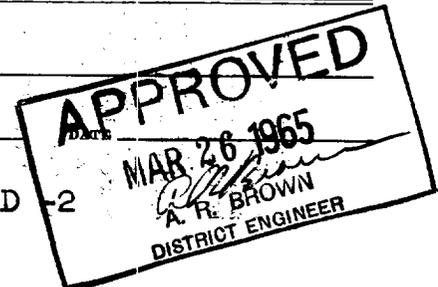
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PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, NMOCC-2, ATL ROS-2, PAN AM HOBBS -3, CALIF MID -2



*See Instructions On Reverse Side