

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. NAME OF OPERATOR <i>Continental Oil Co</i>
3. ADDRESS OF OPERATOR <i>Box 460 Hobbs, New Mexico</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>2230' FSL and 1980' FEL of Sec 4</i>
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3576' gr</i>

5. LEASE DESIGNATION AND SERIAL NO.

LC 031740 b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
*Meyer B-4*9. WELL NO.
28

10. FIELD AND POOL, OR WILDCAT

*oil Center Blinburg*11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec 4, T-215, R-36E

12. COUNTY OR PARISH

13. STATE

Rea N. Mexico

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) *Setting prod string* ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(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.) *

Ran 5 1/2", 14# and 15.5 # casing (29 joints) and set at 6335'. Cemented 1st stage w/ 200 socks class C w/ 4% gel, 3/4% CFR-2 and 1/4# floccle per sock. Followed w/ 150 socks class C w/ 3# sand, 3# salt 3/4% CFR-2 and 1/4# floccle per sock. Cemented 2nd stage w/ 125 socks class C w/ 4% gel and 3# salt per sock. Followed w/ 100 socks class C w/ 3# salt and 3# sand per sock.

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

SIGNED *[Signature]*TITLE *Admin Supervisor*DATE *3-6-72*

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 8 1972

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGSCS) NMFC(4) File

RECEIVED

MAR 14 1972

**OIL CONSERVATION COMM.
HOBBS, N. M.**