

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1421

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 ☐		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Continental Oil Company</i>		8. FARM OR LEASE NAME <i>"B"</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460, Hobbs, New Mexico</i>		9. WELL NO. <i>4</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>660' FSL + 660' FWL of Sec. 12, T-23S, R-36E, Lea County, N.M.</i>		10. FIELD AND POOL, OR WILDCAT <i>Simple Tract</i>
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 12, T-23S, R-36E</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3409 DF</i>		12. COUNTY OR PARISH <i>Lea</i>
		13. STATE <i>N.M.</i>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☒	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	(Other) ☐
(Other) <i>Additional Test & Completion</i> ☒		(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.)*

Clean out to PBL of 3692'. Perf 3524', 3526', 3528',
3530', 3532', 3546', 3548', 3550', 3552', 3554', 3557'
w/125PF. Acidize Perf 3524'-3557'
w/2500 gal 15% LSTAF acid.
Run Prod equip. + place well on prod.

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

SIGNED *McQuibley*TITLE *Drilling & Production Supervisor*DATE *1-27-71*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*USGS (S) NMFLU (4)**File* JAN 29 1971

*See Instructions on Reverse

APPROVED
THUR. R. BROWN
DISTRICT ENGINEER