

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

5. LEASE DESIGNATION AND SERIAL NO.

LC-030556 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Stevens B-20

9. WELL NO.

10. FIELD AND POOL OR WILDCAT

Gulfport Water
Seven Rivers11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 20, T. 235 R. 36 E

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

P. O. 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

660' FNL & 1980' FWL of Sec. 20

14. PERMIT NO.

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

3442' DF

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) ☒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.) *

Status of Well: *Shut in*Approximate date that temp. aban. commenced: *1-17-61*Reason for temp. aban.: *uneconomical*

Future plans for Well:

*Holding for secondary recovery*This approval of temporary
abandonment expires *Dec 1975*Approximate date of future W. O. or plugging: *Fall 1975*

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

SIGNED *Robert J. Smith*TITLE *Division Office Manager*DATE *12/30/74*

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

USGS-5, NMFA-A, File

*See Instructions on Reverse Side

NOV 1 1974
Jim Sims
JIM SIMS
ACTING DISTRICT ENGINEER