

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

GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.

LC-050556(6)

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 ☐

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR

Continental Oil Company

8. FARM OR LEASE NAME

Stream B-20

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, New Mexico 88240

9. WELL NO.

3

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT

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

Sec. 20 T-23S R-36E

14. PERMIT NO.

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

3448' KB

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETE ☐SHOOT OR ACIDIZE ☐ABANDON* ☐REPAIR WELL ☐CHANGE PLANS ☐(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT* ☐(Other) Shut in ☒(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 perti-
nent to this work.)

Status of Well: Shut in

Approximate date that temp. aban. commenced: 3-1-66

Reason for temp. aban.: uneconomical

Future plans for Well:

Holding for secondary recovery

This approval of temporary
abandonment expires Dec 1, 1975

Approximate date of future W. O. or plugging: Fall 1976

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

SIGNED

Robert J. Schultz

TITLE

Division Office Manager

DATE

10/30/74

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

*See Instructions on Reverse Side

USGS-5, NMFA-4, File

NOV 1 1974

JIM SIMS
ACTING DISTRICT ENGINEER