

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.

NM - 0557256
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 NM 54
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME ELLIOTT B-15
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FSL & 990' FEL	10. FIELD AND POOL, OR WILDCAT Drivkaad
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, WT, GR, etc.) 3372' DF
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T-22S, R-37E
	12. COUNTY OR PARISH LUA
	13. STATE NM

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) ☒ Shut InREPAIRING 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: 6-29-66

Reason for temp. aban.: uneconomical

Future plans for well:

study for remedial work

DEC 1 1976

Approximate date of future W. O. or plugging: 9th Qtr. 1976

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

SIGNED SP MillerTITLE Libby NatDATE 12-1-75

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____

*See Instructions on Reverse Side

USGS (5) NM 54 (4) file

JAN 13 1976
GEOLOGICAL SURVEY
NEW MEXICO