

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLIC.
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1421

5. LEASE DESIGNATION AND SERIAL NO.
LC 06 22787 (E)
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

2. NAME OF OPERATOR
Continental Oil Company

3. ADDRESS OF OPERATOR
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

1980' FNL and 1980' FEL of Sec 18

14. PERMIT NO. 15. ELEVATIONS (Show whether DE, RT, GR, etc.)
3232' af

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Thompson Fed #8

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Tison Delaware North

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 18, T-26S, R-32E

12. COUNTY OR PARISH 13. STATE
Lea 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) ☐
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.)*

It is proposed to stimulate this well by the following procedures: Perf w/ 1 spf at 4387, 4389, 4391, 4393, 4407, 4409, 4411, 4413 and 4415. Frac down casing w/ 20,000 gals gelled lease crude and 60,000 # 10/20 sand.

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

SIGNED *Robert J. Grier*

TITLE **Administrative Supervisor**

DATE **7-3-72**

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
JUL 3 1972
ARTHUR R. BROWN
DISTRICT ENGINEER

USGS(5) FILE

*See Instructions on Reverse Side