

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR
Continental Oil Company
3. ADDRESS OF OPERATOR
Box 460, Hobbs, N.M. 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: *1980' FNL + 660' FNL*
AT TOP PROD. INTERVAL: *Same*
AT TOTAL DEPTH: *Same.*

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) *Re-Perforate X*

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5. LEASE

LC-069515

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

North EL Mar Unit

8. FARM OR LEASE NAME

North EL Mar Unit

9. WELL NO.

13

10. FIELD OR WILDCAT NAME

El Mar Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 25, T-26S, R. 32E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3124' DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Scale buildup is preventing fluid from entering the wellbore in the subject well and it is proposed to Re-Perforate to restore production.

- 1. Load the well with treated fresh water.*
- 2. Tag for fill with Tubing*
- 3. Swab Fluid level down to 4200';*
- 4. Perf 4613 to 4620'; 4638' to 4645' w/2 JSPE*
- 5. Return to Production.*

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

SIGNED

Wm. A. Butterfield

TITLE

Admin. Supv.

DATE

2-14-78

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

USGS (5), Partners (9), etc