

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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, N.M. 88240

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

990' FSL & 990' FWL OF SEC. 7

14. PERMIT NO.

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

3373' DF

5. LEASE DESIGNATION AND SERIAL NO.
LC-030556 (6)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
STEVENS B

9. WELL NO.
11

10. FIELD AND POOL, OR WILDCAT

JALMAT YATES GAS

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

SEC. 7, T-23S, R-37E

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

16. 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) **REPAIR CASING**

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) ☐

(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 REPAIR A SUSPECTED CASING LEAK AS FOLLOWS:
RUN TBG. W/RET. B.P. & PKR. AND TEST 5 1/2" CSG. FOR LEAKS. IF LEAKS LOCATED ABOVE 600', SET B.P. AT 700' W/SAND ON TOP & CIRC. CMT. TO SURFACE USING 100 SX. CLASS "C" CMT. PUMP DOWN CSG. & DIS-PLACE PLUG W/WATER TO 50' ABOVE LEAK. SHUT-IN 36-HRS. & DRL-OUT CMT. RUN PROD. TBG. & SWAB TO RESTORE PRODUCTION. IF LEAK FOUND BELOW 600', SET B.P. BELOW LEAK W/SAND ON TOP. RUN TBG. W/RETAINER & SQUEEZE W/100 SX. CLASS "C" CMT. WOC. DRL-OUT RETAINER & PLUG, PULL B.P., RUN PROD. TBG. & SWAB TO RESTORE PRODUCTION.**

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

SIGNED **Wm. A. [Signature]** TITLE **SR. ANALYST** DATE **3-18-76**

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

USGS (5) NMFGU (4) FILE