

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other Instruction
verse side)DATE
n reForm approved.
Budget Bureau No. 42-B1414

5. LEASE DESIGNATION AND SERIAL NO.

LC-030168 (3)

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 Eaves A
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO. 6
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL + 660' FNL of Sec. 19, T.26S, R.37E See County, New Mexico	10. FIELD AND POOL, OR WILDCAT Scarborough Yates 7 Rivers
14. PERMIT NO.	11. SEC., T., R., ME, OR BLM. AND SURVEY OR ALTA Sec. 19, T-26S, R.37E
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 2962' DF	12. COUNTY OR PARISH See
	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

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.)*

Perforate additional pay at approx. 3132', 3134', 3138',
3142', 3144', 3164', 3166', 3172', 3179', with 1.5 SPF.
Frac. with approx. 2,000 gals. LSTNE acid. Set
a CIBP at 3185' to plug off the recently open pay.
Replace the producing equipment and restore to production.

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

SIGNED

TITLE

Adm. Supervisor

DATE

8-5-70

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

USGS-5 FILE

*See Instructions on Reverse Side

APPROVED

AUG 7 1970

ARTHUR R. BROWN
DISTRICT ENGINEER

RECEIVED

AUG 11 1970

OIL CONSERVATION COMM.
HOUSTON, N. L.