

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 42-11121

5. LEASE DESIGNATION AND SERIAL NO.

LC 030168(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Eaves A

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Scarborough Yates 7 River

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

Sec 19, T-26S, R-37E

12. COUNTY OR PARISH

Yea

13. STATE

N. Mex

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface1980' FSL & 1980' FWL of Sec 19, S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

14. PERMIT NO.

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

2956' DF

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 perforate and stimulate this well by the following procedures.

Perf w/ 1 jsp. at 3112', 3117', 3125', 3137', 3142', 3152', 3165' and 3177' (total - 8 shots). Treat perms w/ 5600 gals 15% HCL - NE acid at 5-7 BPM rate. Re-run prod. tbg, rods and pump. Place back on production

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

SIGNED

TITLE Admin. Supervisor

DATE 8-10-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

AUG 12 1971

ARTHUR R. BROWN

DISTRICT ENGINEER

DATE

USGS (5)

NMFL (4) File

*See Instructions on Reverse

RECEIVED

AUG 17 1971

OIL CONSERVATION COMM.
HOBBS, N. M.