

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-030168(a)

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME Eones A
3. ADDRESS OF OPERATOR Box 460 Hobbs, New Mexico	9. WELL NO. 13
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL and 1980' FEL of Sec 30	10. FIELD AND POOL, OR WILDCAT Scarborough 4. Tr 7 River
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 2951' df
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 30, T-26S, R-37E
	12. COUNTY OR PARISH Lea
	13. STATE 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.)\*

Perf w/1 1/2 spf at 3080', 3093', 3100', 3113', 3117', 3121', 3132' and 3143'. Set packer at 2990'. Treated perfor w/1600 gals HCL-NE acid.

Work started - 3-18-72

Completed - 4-18-72

Test - before

Pmptd 46 BO and 96 BW in 24 hrs.

Test - after

Pmptd 107 BO and 100 BW in 24 hrs. 119 mcf g

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

SIGNED

*[Signature]*

TITLE

Administrative Supervisor

DATE

5-23-72

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

MAY 24 1972

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side

USGS(5) NMFA(4) File

RECEIVED

MAY 30 1972

OIL CONSERVATION COMM.  
HOBBS, H. M.