Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.: LC 030139 b

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 X GAS WELL ___ OTHER

7. UNIT AGREEMENT NAME: NMFU

2. NAME OF OPERATOR: Continental Oil Company

8. FARM OR LEASE NAME: Lynn B-1

3. ADDRESS OF OPERATOR: Box 460, Hobbs, New Mexico

9. WELL NO.: 15

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1980' FSL & 660' FWL, Sec. 26-T-23S, R-36E, Lea County, New Mexico

10. FIELD AND POOL, OR WILDCAT: NMFU Field Langlie Mattix Multizon

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 26-23S-R-36E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3370 Est DF

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:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	X	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT*	
REPAIR WELL		CHANGE PLANS		(Other)			
(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.) *

Spudded 10-1-65. Drilled to 312'. Ran 9 Jts. 7 5/8" O.D. 24# casing with Baker Guide Shoe and 3 cent. Cemented W/98 sx Class "A" Cement W/2% Cal. Chl. Plug down at 1:15 A.M. 10-2-65. Cement circulated. Tested W/800#. Tested O.K. Casing set @ 312'.

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

SIGNED Hal C. Tipton TITLE Staff Supervisor DATE 10-4-65

(This space for Federal or State office use)

APPROVED BY ___ TITLE ___ DATE ___

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, NMOCC-2, PAN AM HOBBS -3, ATL ROS-2, CARTER FILE

APPROVED
OCT 7 1965
J. L. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side