

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRI
(Other instructio
verse side)DATE*
OR re-Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 030556 (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 ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface660' FNL and 1650' FEL, Sec. 18, T-23S, R-37E,
Lea County, New Mexico

14. PERMIT NO.

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

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

Stevens B

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT
NMFULanglie Mattix Pool
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 18, 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

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 perti-
nent to this work.)*

Spudded well 12:30 P.M., 10-10-67. Drilled 11" hole at 350'.
Ran 329' (11 joints) 7 5/8" OD 24# H-40 casing, set at 336'. Casing
was cemented with 150 sacks class "C" cement with 4% gel and 2% calcium
chloride. Cement circulated. Plug down 10:15 P.M., 10-10-67. Tested
casing with 750# for 30 minutes. Tested OK. WOC 12 hours.

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

SIGNED

(This space for Federal or State office use)

TITLE Sup. Prod. Engineer

DATE 10-20-67

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE

USGS-5 ATL-Ros-2 CHEV-Mid-2 PAN AM-Hobbs-2 FILE OCT 23 1967

*See Instructions on Reverse Side

J L GORDON
ACTING DISTRICT ENGINEER