

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)Form approved
Bulletin Bureau No. 42-10421

5. LEASE DESIGNATION AND SERIAL NO.

LC-030168(6)

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 NMFU
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME EAVES B-1
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	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' FNL + 660' FWL of Sec 30, T-26S, R-37E in Lea County, N. Mex.	10. FIELD AND POOL, OR WILDCAT Harborough Yates 7 Rivers
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-26S, R-37E
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 2927' GR	12. COUNTY OR PARISH Lea
	13. STATE N. Mex.

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.)*

This well was spudded at 3:30 P.M., 1-12-70.
Drilled 12 1/4" hole to 532' and set 8 5/8" 24" casing.
Cemented casing with 240 sacks of class 'C' cement.
Cement circulated + woc 24 hours. Tested casing with 1000# for 30 minutes, held OK.

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

SIGNED

TITLE Adm. Section Chief

DATE 1-16-70

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

USGS-5 FILE

*See Instructions on Reverse

ACCEPTED FOR RECORD

JAN 19 1970

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO