

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPL
(Other instructions
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

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 checked="" type="checkbox"/> OTHER (DUAL)	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY	8. FARM OR LEASE NAME VAUGHN B-1
3. ADDRESS OF OPERATOR Box 460, HOBBS, N. M. 88240	9. WELL NO. 6
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. 1	10. FIELD AND POOL OR WILDCAT JALMAT GAS & LANGHE MATOK
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3345' GR.
	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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) SET SURFACE CASING	
(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.) *

Set 9 5/8" 36# Casing @ 500'. Cemented w/250 sks.
& circ. to sfc. Tested w/1000#, held ok.
Spudded on 9-10-74. Ran sfc. casing on
9-11-74.

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

SIGNED

TITLE

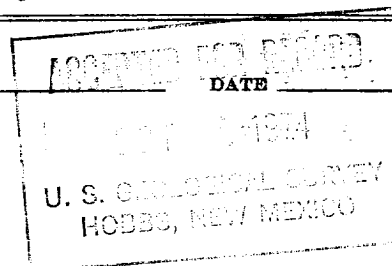
DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



USGS-5, NMFO-4, F180

*See Instructions on Reverse Side