

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

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. LC 061374 A
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240	7. UNIT AGREEMENT NAME BELL LAKE
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* At surface 660' FNL E 660' FEL OF SEC. 7	8. FARM OR LEASE NAME BELL LAKE UNIT 5
14. PERMIT NO.	9. WELL NO. 16
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3617' DF	10. FIELD AND POOL, OR WILDCAT UNDESIGNATED
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 7, T-24S, R-34E
	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*

INSTALL INTERMEDIATE CASING X
(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.)*

Ran 10 3/4" 45.50# K-55 casing & set @ 5168'.
Cemented in 4 stages w/total of 2600 sacks Class
"C" cement. Cementing started 2-18-75, completed 2-19-75.
Cement circ. to surface. WOC 48 Hrs. Tested CSG.
to 800#, held OK.

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

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

156p-5, Lowe, Exxon, Phillips, Bass, File