## UNIT > STATES DEPARTMENT JF THE INTERIOR (Other instructions verse side)

SUBMIT IN TRIPLIC'

Form approved.

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٠.	LEASE	DESIGN	ATION	AND	SERI	AL NO	
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6. IF INDIAN, ALLOTTEE OR TRIBE N

GEOLOGICAL	SURVEY

SUNDRY NOTIC	ES AND	REPORTS	ON	WELLS
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(Do not use this form for proposals to drill or to deepen or plug back to Use "APPLICATION FOR PERMIT—" for such proposals	a different reservoir.
OIL GAS WELL OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR  Continental oil Comp	Pour Ascarta D-21/
BOX 460 Hobbs, Ne	W Merico S. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with my State re See also space 17 below.) At surface	equirements. 10. FIELD AND FOOL, OR WILDCAT
980' FSL and 1980' FEL of Se	11. SEC., T., R., M., OR BLK (AND SURVEY OR AREA

14. PERMIT NO 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF		nu		[	_	_
<del>-</del>	<u>  </u>	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)	_	-
(04)			<del></del>			_
(Other)			!I	(Note: Report results of multi Completion or Recompletion Re	port 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.)\*

Kemedial work was performed on Squeezed perfo 2940'-2990' W/200 socks Closs C coment W/3 # Salt per Sock. Perforated at 3/08', 14' and 3/18' W/1jspf. Let pocker at 3078'. Treated W/ 1500 gala 1590 retarded acid. Treated 3/14' and 3/18' W/500 gals 2090 HCL-NE retorded acid.

2001 compl 8.76.71

<u> </u>		
18. I hereby certify that the foregoing is true and correct		
SIGNED SIGNED	TITLE admin	Supervisor DATE /- 14-72
(This space for Federal or State office use)		V
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	ACCEPTED FOR PRECORD

JAN 1.9 1972