

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐
well well other

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460, Hobbs N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL + 1980' FNL

AT TOP PROD. INTERVAL: 5mp

AT TOTAL DEPTH: 5mo

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
~~SHOOT OR~~ ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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5. LEASE

NM 0321613

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFLU

8. FARM OR LEASE NAME

Jack B-26

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

JUSTIS Blinobry

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 26, T-24S, R-37E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3209' DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Rigged up Workover Rig 7-25-77. Ran Bit & Scraper
cleaned out to T.D., Did Not Acidize. Installed
Pumping Equipment and changed the well status
From Flowing to Pumping. Completed 8-23-77
Pumping 11 BO, 15 BW, 27.7 MCFB IN 24 Hrs.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Wm. A. Butterfield TITLE ADMIN. SUPV. DATE 12-15-77

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

ACCEPTED FOR RECORD

DEC 19 1977

J. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGS-5, NMFLU-4, File

*See Instructions on Reverse Side