

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

5. LEASE DESIGNATION AND SERIAL NO.

LC 032326 (a)

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR		8. FARM OR LEASE NAME
Continental Oil Company		Jack A-29 Com. A/C-1
3. ADDRESS OF OPERATOR		9. WELL NO.
P. O. Box 460, Hobbs, New Mexico 88240		3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		10. FIELD AND POOL, OR WILDCAT
1970' FNL AND 330' FEL, SECTION 29, T-24S, R-37E, LEA COUNTY, NEW MEXICO		Jalmat (Gas)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		12. COUNTY OR PARISH
Sec. 29, T-24S, R-37E		13. STATE
14. PERMIT NO.		Lea N.M.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		
3269' GR		

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 COMPLETION

ABANDON*

CHANGE PLANS

Clean out

X

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.)*

In order to increase its producing rate, it is proposed to clean out the well as follows:

1. Kill well with lease crude.
2. Clean out sand to 3200' with gas.
3. Pump 1,000 gallons 15% LTNE and 100 gallons "ADOFOAM" anti-foaming agent into casing annulus and shut-in 6 hours.
4. Swab well and return to production.

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

SIGNED

TITLE

Staff Supervisor

DATE 10-5-67

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

USGS-5 PAN AM-Hobbs-2 ATL-Ros-2 CHEV-Mid-2 FILE

*See Instructions on Reverse Side

APPROVED
OCT 6 1967
A. R. BROWN
DISTRICT ENGINEER