

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

LC 032582 (b)

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 <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME Wells B-1
3. ADDRESS OF OPERATOR P.O. Box 460, Hobbs, New Mexico	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 1980' FWL of Sec. 1, T-25S, R-36E,  Lea County, New Mexico, NMPM	10. FIELD AND POOL, OR WILDCAT NMFU Field Custer Ellenburger Pool
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T-25S, R-36E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3252 GR	12. COUNTY OR PARISH 13. STATE Lea New Mexico

## 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\*

(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.)\*

Spudded location 9:00 P.M. 11-7-64. Drilled to 1215' 11-10-64.  
Set 1232' of 13 3/8 O.D. casing at 1215'. Cemented with 1095 sx  
Class "C" cement W/4% gel. Cement circulated. Plug down at 7 a.m.  
11-11-64. Waited on cement 24 hours. Tested with 800# for 30 min.  
Tested O.K.

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

SIGNED

G. C. Jamieson

TITLE Assistant Dist. Manager

DATE 11-12-64

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

NOV 16 1964

DATE

J. L. GORDON

ACTING DISTRICT ENGINEER

USGS -5, NMOCC -2, JM PAN AM HOBBS -3, ATL-ROS, 2, CALIF-Hous & Mid, 1 each.  
\*See Instructions on Reverse Side