

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-11421.
5. LEASE DESIGNATION AND SERIAL NO.

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.)M/M-07E1613
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	M. M. J. V.
3. ADDRESS OF OPERATOR	8. FARM OR LEASE NAME
Continental Oil Company	Josh B-26
9. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	9. WELL NO.
P. O. Box 460 Hobbs, New Mexico 88240	4
10. FIELD AND POOL, OR WILDCAT	M. M. J. V. Field
11. SEC., T., R., M., OR BILE AND SURVEY OR ALBA	Justice County, N. Mex.
12. COUNTY OR PARISH	13. STATE
14. PERMIT NO.	15. ELEVATIONS (Show whether 10, 20, 30, etc.)
	3205 DF (est.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☒
FRACURE TREAT	☐	FRACURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other) <i>Spud date</i>	
(Other)	☐		
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETION	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☒
CHANGE PLANS	☐		

(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.)

This well was spudded 2-28-69. Drilled a 12 1/4" hole to 985'. Ran 8 3/8" 29# casing and cemented with 400 sk. class H. with 4% gel-2% calcium chloride. Cement was circulated. 27 hours w.o.c. time. Tested casing with 1000# pressure for 30 minutes. Tested ok.

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

SIGNED <i>W. E. Yeakley</i>	TITLE <i>Adm. Section Chief</i>	DATE <i>3-3-69</i>
(This space for Federal or State office use)		
APPROVED BY	TITLE	APPROVED
CONDITIONS OF APPROVAL, IF ANY:		

MAR 11 1969

*See Instructions on Reverse Side

J L GORDON
ACTING DISTRICT ENGINEER