

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(Other Instructions
See Back)Form approved.
Bureau Order No. 42 R1454

5. LEASE DESIGNATION AND SERIAL NO.

LC-032326-6

6. IF INDIAN, ALLEGED, 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. OLD WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	NAMEFU
Continental Oil Company	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR	JACK B-27
P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	10. FIELD AND POLE, OR WILDCAT
1480' FSL + 330' FEL of Section 27, T-24S, R-37E	JULIUS BLINERRY
in T. & County	11. TOWN, R., E., NE, SE, SW, OR LBR. AND SURVEY OR AREA
14. PERMIT NO.	12. COUNTY OF FARM 13. STATE
15. ELEVATIONS (Show whether DF, KY, CR, etc.)	LEA N. MEX.
3221' DF	

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) ☐FULL 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.)

Drilled a 7 7/8" hole to a T D of 5700' + set 5 1/2" 14# J-55 casing. Cemented with 300 sacks Trinity light weight cement and 210 sacks class c cement. Top of cement at 2050. WOC 24 hrs. Tested casing with 1500 # for 30 minutes, held OK.

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

SIGNED

TITLE Adm. Section Chief

DATE 11-4-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

USGS-5 FILE

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

NOV 5 1969

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO