

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other Instructions on re-
verse side)Form approved.
Budget Bureau No. 42-F1424.

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 ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Continental Oil Company.</i>	8. FARM OR LEASE NAME <i>Block A-29</i>
3. ADDRESS OF OPERATOR <i>Box 460 Hobbs, New Mexico 88240.</i>	9. WELL NO. <i>5</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>825' FNL + 1750' FEL of Section 29, T-24S, R-37E</i>	10. FIELD AND POOL, OR WILDCAT <i>English Wells 7 Pools</i>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>EL. 3935' DF?</i>
	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>N. Mex.</i>

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) *Comprehensive Logging* ☒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.) *

*This well was spudded on November 1, 1970.
Drilled a 12 1/4" hole to 770' and set 8 5/8" 20# H-40 casing. Cemented with 350 sacks of class "C" cement. WOC 24 hours. Cement circulated, tested casing with 1000# for 30 minutes, held OK.*

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

SIGNED *M. A. [Signature]*TITLE *Dist. Supervisor*DATE *11-4-70*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE

NOV 6 1970

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED

11 11 1970

OIL CONSERVATION COMM.
HOUSTON, TEXAS