

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on reverse side)Form approved.
Bureau No. 42-11131

5. LEASE DESIGNATION AND SERIAL NO.

71777-7406

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 ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Continental Oil Company		8. FARM OR LEASE NAME Trick A-29	
3. ADDRESS OF OPERATOR P.O. Box 460, Hobbs, N.M. 88240		9. WELL NO. 6	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1900 FNL + 1700' FE L of Sec. 29, T-24S, R-37E, Lea County, New Mexico.		10. FIELD AND POOL, OR WILDCAT Lange - multiple Lange - 1900 FNL + 1700' FE L of Sec. 29, T-24S, R-37E	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) Est. 3284 D4	
		12. COUNTY OR PARISH Lea	
		13. STATE N.M.	

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.)*

This well was spudded 3-1-71.
Drilled 12 1/4" hole to 756' + set 8 5/8" 20#
H-40 csg at 756'. Cemented w/35024. Classic
amt. in o.c. 24 hrs. amt. circ. 24 hrs. 24 hrs. 24 hrs.
w/1000# for 30 min. held OK.

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

SIGNED

M.E. Galt

TITLE

Mineral Rights Agent

DATE

3-3-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

4545 (5) north (4) file

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
HOENES, NEW MEXICO