

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR  
CONTINENTAL OIL COMPANY
3. ADDRESS OF OPERATOR  
P.O. BOX 100, TULSA, OKLA 74101
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1660/100 1980/100  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
- TEST WATER SHUT-OFF ☐ ☐
- FRACTURE TREAT ☐ ☐
- SHOOT OR ACIDIZE ☐ ☐
- REPAIR WELL ☐ ☐
- PULL OR ALTER CASING ☐ ☐
- MULTIPLE COMPLETE ☐ ☐
- CHANGE ZONES ☐ ☐
- ABANDON\* ☐ ☐
- (other) cancel AFD ☒

5. LEASE  
22 063452
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME  
TMM 3U
8. FARM OR LEASE NAME  
Warren Unit
9. WELL NO.  
9-1
10. FIELD OR WILDCAT NAME  
Subs / Bunsbury
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
SEC. 25-205-18E
12. COUNTY OR PARISH  
Ore
13. STATE  
TMM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5571

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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 is beyond the scope of our current drilling program.  
The Application and Permit to Drill may be cancelled  
**APP. LOC. PERMIT EXPIRED**

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Wm. R. Butterfield TITLE Administrative Supervisor DATE 6-29-79  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

4561 5

\*See Instructions on Reverse Side

