

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE
(Other instruction on re-
verse side)Form approved,
Budget Bureau No. 42-R14245. LEASE DESIGNATION AND SERIAL NO.
LC-058698
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 MCA Unit
2. NAME OF OPERATOR Continental Oil Company	8. FARM OR LEASE NAME MCA Unit
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, New Mexico 88240	9. WELL NO. 32
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL + 1980' FNL of Sec. 23, T-17S, R-32E, Lea County, New Mexico	10. FIELD AND POOL, OR WILDCAT Grayburg-SA
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T-17S, R-32E
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4031' DF GL per log	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) **Clean out, Repair casing, Pull in' Pipe.**

PULL OR ALTER CASING

MULTIPLE COMPLETION

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.)

It is proposed to clean out MCA unit NO. 32 and test the casing for leaks and repair if necessary. Drill additional 70' in the Grayburg-SA and free with approx. 5,000 gals. of Grayburg-SA Reduced Water containing "ADOMATEL" + "ADOMATE AQUA", followed with approx. 11,000 gals. 15% LSTNE acid.

Run producing equipment and return to production.

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

SIGNED

M. E. Wickham

TITLE

Adm. Supervisor

DATE

9-11-70

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

USGS-5 FILE
MCA Part 1

*See Instructions on Reverse Side

APPROVED

SEP 16 1970

ARTHUR R. BROWN
DISTRICT ENGINEER