

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLIC.
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-029405(b)

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

SEP 14 1972

2. NAME OF OPERATOR

Continental oil Co. U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

3. ADDRESS OF OPERATOR

Box 460 Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

25' FSL and 2590' FWL of Sec 20

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3974' df

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit

9. WELL NO.

96

10. FIELD AND POOL, OR WILDCAT

mlj G-SA Repress

11. SEC. T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 20, T-17S, R-32E

12. COUNTY OR PARISH 13. STATE

Lea N. Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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 perti-
nent to this work.)*

Set packer @ 3980'. Treated OH 3980'-4048' w/ 2000 gals
28% NE acid. Set OH packer @ 3812'. Acid fric'd w/
2000 gals 28% NE acid.

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

SIGNED

Robert Gault

TITLE

Admin. Supervisor

DATE

9-12-72

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

SEP 15 1972

*See Instructions on Reverse Side U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGS (5)

USGS (5) MCA (3) F.R.

RECEIVED

SEP 1 1972

OIL CONSERVATION COMM.
HOBBS, N. M.

SEP 1 1972

U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
DENVER, COLORADO