

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate\*  
(Other instructions on re-  
verse side)

Form approved,  
Budget Bureau No. 42-R1121.

5. LEASE DESIGNATION AND SERIAL NO.  
**LC 029410(6)**

6. 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.)

7. OIL AGREEMENT NAME

**MCA**

8. FARM OR LEASE NAME

**MCA Unit**

9. WELL NO.

**278**

10. FIELD AND POOL, OR WILDCAT

**Mali G-SR Popen**

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

**Sec 30, T-17S, R-32E**

12. COUNTY OR PARISH 13. STATE

**Lea N. Mex**

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
**Continental Oil Company**

3. ADDRESS OF OPERATOR  
**P. O. Box 460, Hobbs, New Mexico 88240**

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

**2615' FNL and 1345' FEL of Sec 30**

14. PERMIT NO.

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

**3910' est g**

12. COUNTY OR PARISH 13. STATE

**Lea N. Mex**

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)

PLUG 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.)

Spudded 12 1/4" hole on 11-28-71. Ran 8 5/8", 20# casing and set at 750'. Cemented w/200 sacks class "C" cement w/490 gal. Followed w/200 sacks class "C" cement w/290 CaCl2. Cement circulated. WOC 24 hours. Tested casing w/1000 psi for 30 minutes. Held OK.

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

SIGNED

*[Signature]*

TITLE

Administrative Supervisor

DATE

11-29-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

USGS (5) File

MCA(3)

TITLE

ACCEPTED FOR RECORD

DATE

DEC 1 1971

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side