

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Form approved,
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 058697 (6)

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 INJECTION

7. UNIT AGREEMENT NAME

MCA

2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY

8. FARM OR LEASE NAME

MCA UNIT

3. ADDRESS OF OPERATOR
Box 460, Hobbs, N.M. 88240

9. WELL NO.

197

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

10. FIELD AND POOL, OR WILDCAT

MALJ. G-SA REPRESS

2615' FSL E' 25' FWL OF SEC. 30

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

SEC. 30, T-17S, R-33E

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4037' DF

12. COUNTY OR PARISH 13. STATE

LEA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) TEMP. ABANDON

(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 pertinent to this work.)*

Pulled tubing & plv. Set CIBP @ 3880'. Displaced hole w/ treated fresh wtr. Set plv. @ 3850' & tested csq. above plv. w/ 600 psi. Held OK. Pulled plv., re-set CIBP @ 3800'. Displaced hole w/ trtd. fresh wtr. Removed tubing, capped well & temp. abandoned.

Work started 2-11-75, completed 2-14-75.

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

SIGNED

[Signature]

TITLE

SR. ANALYST

DATE

2-19-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, MCA-3, File

*See Instructions on Reverse Side

