

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.
LC-029405(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Mitchell A

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT
Malgomar Paddock

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 20, T-175, R-32E

12. COUNTY OR PARISH 13. STATE
Lea N. Mex

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK Re-complete DEEPEN PLUG BACK

b. TYPE OF WELL
OIL WELL GAS WELL OTHER *Water Injection* SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
Continental oil Co.

3. ADDRESS OF OPERATOR
Box 460 Hobbs N. Mex

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
At surface
660' FWL and 460' FWL of Sec 20
At proposed prod. zone
Some

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. line, if any)

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED TO THIS WELL
40

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

20. ROTARY OR CABLE TOOLS
N/A

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

22. APPROX. DATE WORK WILL START*
11-16-72

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
		<i>No change</i>		

It is proposed to plug back and recomplete this well as a Grayburg sand and/or injection well by the following procedures: Set CIBP at 4100' w/ 1 sock cement on top. Perf w/ 1/2" spf at 3642', 3650', 3654', 3658', 3694', 3698', 3702' and 3706'. Treat perfs 3694'-3706' and 3642'-3658' w/ 750 gals 15% HCL-NE acid each. Frac down casing w/ 25,000 gals treated produced water and 50,000 # 20/40 sand.
Note: This well, when completed, will be named *MCA Unit No. 331.*

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED *Robert Gault* TITLE *Admin. Supervisor* DATE *11-9-72*

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

USGS(5) File