

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 ☒ WATER INJECTION WELL

2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR
BOX 460, HOBBS, N.M. 88240

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

660' FSL & 660' FEL OF SEC. 26

14. PERMIT NO.

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

3102' GR.

5. LEASE DESIGNATION AND SERIAL NO.

LC 069575

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

NORTH EL MAR UNIT

9. WELL NO.

33

10. FIELD AND POOL, OR WILDCAT

EL MAR DELAWARE

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

SEC 26, T-26S, R-32E

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

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☐
☐
☐

PULL OR ALTER CASING

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☐
☐
☐

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) CONVERT TO INJECTION

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☐
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(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.)

This well was converted to water injection by cleaning out to PBD 4638' and running cement lined tubing w/ retention pkr. @ 4540'

Work started 3-12-75, completed 7-1-75

This waterflood authorized by N.M.O.C.C. Order No. R-4629 & R-4630 dated 9-13-73.

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

SIGNED

[Signature]

TITLE

SR. ANALYST

(This space for Federal or State office use)

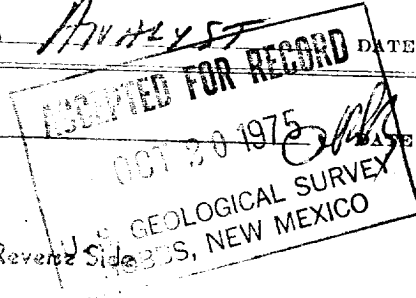
APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

10-10-75



*See Instructions on Reverse Side

1565-5, Partners-9, File