

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse 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. GIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>   |   | 5. LEASE DESIGNATION AND SERIAL NO.                                       |
| 2. NAME OF OPERATOR<br>Continental Oil Company   |   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                      |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 460, Hobbs, New Mexico 88240   |   | 7. UNIT AGREEMENT NAME<br>MCA   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>660' FSL & 1980' FWL, Section 19, T-17S, R-32E,<br>Lea County, New Mexico |   | 8. FARM OR LEASE NAME<br>MCA Unit   |
| 14. PERMIT NO.   | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>3925 DF | 9. WELL NO.<br>102  |
|  |   | 10. FIELD AND POOL, OR WILDCAT<br>Maljamar Repress.<br>(GSA) Pool         |
|  |   | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 19, T-17S, R-32E |
|  |   | 12. COUNTY OR PARISH<br>Lea   |
|  |   | 13. STATE<br>N.M.   |

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

| NOTICE OF INTENTION TO:                      |   | SUBSEQUENT REPORT OF:                          |  |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) <input type="checkbox"/>               |  |

(Other) Convert to Water Inj.

(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.)\*

Approval of the New Mexico Oil Conservation Commission to convert this well to water injection for the MCA Unit Waterflood Expansion was obtained under Administrative Order WFX 253, dated March 15, 1967. Therefore, it is proposed to convert this well using the following procedure:

1. Tag bottom with tubing and tally out.
2. Run 2 3/8" OD EUE tubing w/packer to be set at approximately 3400'.
3. Place well on injection.

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

SIGNED Charles Pickering TITLE Acting Supervising Production Engineer DATE 12-13-67

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:  
USGS-5 PARTNERS-15 FILE

DEC 18 1967  
A. R. BROWN  
DISTRICT ENGINEER