

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☐ other INJECTION WELL
2. NAME OF OPERATOR Continental Oil Company
3. ADDRESS OF OPERATOR Box 460, Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660 FNL + 660 FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐ ☐
FRACTURE TREAT ☐ ☐
CO ~~water~~ acid ACIDIZE ☒ ☐
REPAIR WELL ☐ ☐
PULL OR ALTER CASING ☐ ☐
MULTIPLE COMPLETE ☐ ☐
CHANGE ZONES ☐ ☐
ABANDON* ☐ ☐
(other) ☐ ☐

5. LEASE LC 031696 (b)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME Eumont Hardy
8. FARM OR LEASE NAME Eumont Hardy Unit
9. WELL NO. 5
10. FIELD OR WILDCAT NAME Eumont Yates 7 Rurs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T-20S, R-38E
12. COUNTY OR PARISH Lea 13. STATE NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3502' DF

(NOTE: Report results of multiple completions or zone change on Form 9-330.)

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.)*

It is proposed to CO and acid. the injection zone of Eumont Hardy No. 5 to lower injection pressure & increase injection rates. Procedures of the work are as follows:
1. Rig up. Tag for fill. POOH w/ pkr + tbg. CO to PBTD (3793') if necessary.
2. Set pkr @ $\pm 3650'$ and prepare to acidize pkr w/ 2000 gal MOD 202 acid w/ additives in two stages. Divert w/ 1000 lbs rock salt mixed w/ 650 gal brine wtr w/ 1000 gal guar gum after 1st stage. Flush to pkr w/ 21 bbls TFW after 2nd stage.
3. Release treating pkr. Run tension pkr and 2 3/8" tbg to 3652'. Set pkr.
4. Flange up wellhead + start injection.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Wm. D. Dutterfield TITLE ADMIN. SUPV. DATE 6-23-78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
JUN 26 1978
D. A. L.
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS(5), NMCC(2), Panthers(7), F...