

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE\*  
(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.)

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR <u>Continental Oil Company</u></p> <p>3. ADDRESS OF OPERATOR <u>P. O. Box 460, Hobbs, New Mexico</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface</u> <u>1980' FNL &amp; 660' FBL, Section 25, T-17S, R-32E, Lea County, New Mexico</u></p> <p>14. PERMIT NO. _____</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <u>LC 058697 (b)</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____</p> <p>7. UNIT AGREEMENT NAME <u>MCA</u></p> <p>8. FARM OR LEASE NAME <u>MCA Unit</u></p> <p>9. WELL NO. <u>137</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Maljamar Repress. (GSA) Pool</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 25, T-17S, R-32E</u></p> <p>12. COUNTY OR PARISH <u>Lea</u></p> <p>13. STATE <u>N.M.</u></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>4024' DF</u></p>	

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) _____	
(Other) <u>Convert to Water Inj.</u> <input checked="" type="checkbox"/>		(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 WCA No. 207, dated August 27, 1967. Therefore, it is proposed to convert the well using the following procedure:

1. Check for fill, clean out if necessary, drill out plug from 4,200 to 4,260', and deepen from 4,260 to 4,315'.
2. Run Gamma Ray-Neutron log.
3. Run cement lined tubing with packer set at approximately 3,850'.
4. Place well on injection.

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

SIGNED

*James D. [Signature]*

TITLE Supervising Engineer

DATE 9-11-67

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

USGS-5 PARTNERS-15 FILE

\*See Instructions on Reverse Side

SEP 18 1967

*[Signature]*  
DISTRICT ENGINEER