

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN THIS  
(Other instruction  
verse side)

FE-  
re-

Form approved.  
Budget Bureau No. 42-R1421

5. LEASE DESIGNATION AND SERIAL NO.  
*LC-057210*  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

2. NAME OF OPERATOR  
*Continental Oil Company*

3. ADDRESS OF OPERATOR  
*P. O. Box 460, Hobbs, New Mexico 88240*

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
*1410' FNL & 2550' FWL, Sec. 28, T-17S, R-32E  
Lea County, New Mexico*

14. PERMIT NO. 15. ELEVATIONS (Show whether BF, RT, OR, etc.)  
*EL 3980' DF*

7. UNIT AGREEMENT NAME  
*MCA Unit*

8. FARM OR LEASE NAME  
*MCA Unit*

9. WELL NO.  
*260*

10. FIELD AND POOL, OR WILDCAT  
*MCA G-SA*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
*Sec. 28, T-17S, R-32E*

12. COUNTY OR PARISH 13. STATE  
*Lea N.M.*

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF   
FRACTURE TREAT   
SHOOT OR ACIDIZE   
REPAIR WELL   
(Other)

PULL OR ALTER CASING   
MULTIPLE COMPLETE   
ABANDON\*   
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF   
FRACTURE TREATMENT   
SHOOTING OR ACIDIZING   
(Other) *Continuous Routine*

REPAIRING WELL   
ALTERING CASING   
ABANDONMENT\*

(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 spudded on August 5, 1970.  
Drilled a 12 1/2" hole to 820' and set 8 5/8" 20# K-55 casing.  
Cemented with 350 sacks of class "C" cement, WOC 24 hours.  
Cement circulated. Tested casing with 1000 # for 30 minutes,  
held OK.*

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

SIGNED *[Signature]* TITLE *Adm. Supervisor*

DATE *8-7-70*

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

USGS-5 FILE  
*MCA Partners*

\*See Instructions on Reverse Side

