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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State ☐	Fee ☒
5. State Oil & Gas Lease No.	

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 --" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER- <u>WATER INJECTION WELL</u>		7. Unit Agreement Name <u>EUMONT HARDY</u>
2. Name of Operator <u>CONTINENTAL OIL COMPANY</u>		8. Farm or Lease Name <u>EUMONT HARDY UNIT</u>
3. Address of Operator <u>Box 460, Hobbs, N.M. 88240</u>		9. Well No. <u>40</u>
4. Location of Well UNIT LETTER <u>K</u> <u>2970</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1980</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>6</u> TOWNSHIP <u>21-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat <u>EUMONT MULTIZONE</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3501' DF</u>		12. County <u>LEA</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒	PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐
PULL OR ALTER CASING ☐	OTHER <u>REPAIR COMMUNICATIONS</u> ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Communications of the injected water with the surface casing has recently occurred, and the well has been shut-in. The following repairs are proposed:

Locate leaks, if any, and squeeze w/100 sks. Class "C" cement. If no leaks found, run cement bond log and perf. w/4 ISPF as determined by log. Squeeze w/100-150 sks. Class "C" cement. WOC, drill out plug, & test to 1000#. Rasqueeze if necessary. Pull BP, re-run tubing, packer & tailpipe. Place back on injection.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE SR. ANALYST DATE 12-31-74

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT I DATE JAN 6 1975

CONDITIONS OF APPROVAL, IF ANY:

NMOCC - 4, Partners - 7, File