Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions re-verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.: LC 029509 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Brish B

9. WELL NO.: 3

10. FIELD AND POOL, OR WILDCAT: Maljamar G-SA Reptess.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 22, T-17S, R-32E

12. COUNTY OR PARISH: Lea

13. STATE: N. Mex

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 WATER INJECTION WELL

2. NAME OF OPERATOR: CONTINENTAL OIL CO.

3. ADDRESS OF OPERATOR: BOX 460 HOBBS, N. MEX 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 660' FNL & 1980' FEL of SEC. 22, T-17S, R-32E, IN LEA COUNTY, N. MEX.

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 4020 DF

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) CONVERT TO WATER INJ.			X
(Other)				(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 converted to water injection by the following procedure.

Tagged fill at 4139'. Ran 2 3/8" OD cement lined tubing with packer. Set packer at 3895' and placed well on injection 9-9-69. Tested injection rate - 710 BW with 0 pressure in 24 hrs.

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

SIGNED [signature] TITLE Adm. Section Chief DATE 9-16-69

(This space for Federal or State office use)

APPROVED

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 17 1969

J. L. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side