

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other Instructions on re-
verse side)058395
FEDERAL BUDGET
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-058698-10)

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 ☒ <u>Water Injection Well</u>	7. UNIT AGREEMENT NAME <u>MCA</u>
2. NAME OF OPERATOR <u>Continental Oil Company</u>	8. FARM OR LEASE NAME <u>MCA Unit</u>
3. ADDRESS OF OPERATOR <u>P. O. Box 460, Hobbs, NM 88240</u>	9. WELL NO. <u>84</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>660' FSL & 660' FEL of Sec. 22</u>	10. FIELD AND POOL, OR WILDCAT <u>Maj. G-SA Reprss.</u>
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 22, T-17S, R-32E</u>
15. ELEVATION* (Show whether DF, RT, GR, etc.) <u>3988' DF</u>	12. COUNTY OR PARISH <u>Lea</u>
	13. STATE <u>NM</u>

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)

LIFT OR ALTER CASING ☐MULTIPLE COMPLETION ☐ABANDON* ☐CHANGE PLANS ☐Install Casing ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

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 (Include 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 install 3800' of 4 1/2" casing and cement with 350 sacks class "C" cement, in order to cut down on water loss to non-pay intervals. (Casing: 4 1/2" 9.5# J-55 ST & C).

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

SIGNED [Signature]TITLE Admin. SupervisorDATE 9-21-73

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____

DATE _____

APPROVED
SEP 21 1973ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side