

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions
reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL 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—" for such proposals.)LC-058698 (6)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLE. AND
SURVEY OR AREA

12. COUNTY OR PARISH

13. STATE

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ *Water Injection Well*2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 882404. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

660' FNL of 660' FWL of Sec. 23

14. PERMIT NO.

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

4029' OF

Sec. 23 T-17S R-32E

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) ☒ *Water Shut Off*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 perti-
nent to this work.)*

Reformed 4 1/2" casing w/ 2 SS PF 3635'-3638'. Set Cmt. Petr.
at 3,561', pumped in 150 sacks class 'C' cement.
Drilled Petr. at 3,561' & cement to 3,639'. Tested perf.
w/1000", held bk. Cleaned out 4,129'-4,150'. Ran
injection tubing & packer. Placed well back on
injection.

Water: Started 4-18-74, completed 4-28-74, Injection 4-28-74

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

SIGNED

TITLE

Division Office Manager

DATE 5-14-74

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD
MAY 16 1974GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

USGS-5, MCA-3, File