

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 058697(6)

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

WATER INJECTION WELL

2. NAME OF OPERATOR

CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR

Box 460, HOBBS, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1980' FNL & 660' FEL OF SEC. 25

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA UNIT #4

9. WELL NO.

137

10. FIELD AND POOL, OR WILDCAT

MALJ. G-SA REPRESS.

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

Sec. 25, T.17S, R.32E

14. PERMIT NO.

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

4024' DF

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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☐
☐
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☐

REPAIRING WELL

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☐
☐
☐
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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

(Other)

DEEPEN, STIM & INST. CSG.

(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.)*

Deepened from 4260' to 4279'. Treated OH w/ 500 gals 15% Acid & 2000 gals trtd. fresh wtr. Frac w/ 10,000 gals trtd. gelled wtr. Dumped pea gravel to 3850'. Washed out to 4025'. Ran 4" Hydril "FJ" CSG to 4032'. Cmt w/ 75 sks Class "C". Drilled out cmt 2735' - 4039' & cleaned out to TD. Ran cmt lined tubing & set 4" tension plr. @ 3942'. Resumed injection. Workover started 7-8-75, completed 7-30-75

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

SIGNED

[Signature]

TITLE

SR. ANALYST

DATE

8-12-75

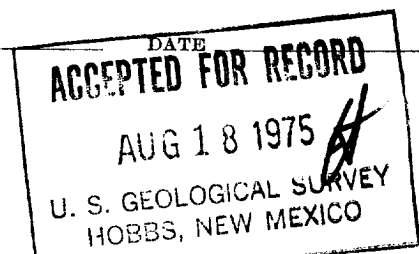
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side



4565-5, MCA-4, File