

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection | 7. UNIT AGREEMENT NAME MCA |
| 2. NAME OF OPERATOR Continental oil Company | 8. FARM OR LEASE NAME MCA Unit |
| 3. ADDRESS OF OPERATOR Box 460 Hobbs, New Mexico | 9. WELL NO. 249 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL and 1980' FWL of Sec 26 | 10. FIELD AND POOL, OR WILDCAT Mali G-SA Repress |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3948' df |
| | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 26, T-17S, R-32E |
| | 12. COUNTY OR PARISH Lea |
| | 13. STATE N. Mex |

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

NOTICE OF INTENTION TO:

| | |
|--|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input checked="" type="checkbox"/> Converting to injection | |

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.) *

Went in hole w/ 6 3/4" bit and drld out cmt from ground level to 35'. Ran 4 1/2" 10.23# casing and set at 4101'. Cemented w/ 75 sacks class C cement w/ 3# sand, 3# salt and 1/4# floccle per sack. Top of cement by survey at 3700'. PBD at 4070'. Treated OH 4218'-4100' w/ 3000 gals 20% HCL-NE acid. Set 2 3/8" cement-lined tubing at 4067' w/ 12 pts tension. Ploed on injection. Work started - 12-26-71 Completed - 1-17-72

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

SIGNED [Signature] TITLE Admin Supervisor DATE 1-28-72

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

| |
|---|
| DATE <u>1/28/72</u> |
| FILE NO. <u>9/2</u> |
| U.S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO |

*See Instructions on Reverse Side

USG&CS) MCA(3) File