

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse 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 ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. LC 058699
2. NAME OF OPERATOR Continental Oil Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 460, Hobbs, N. Mex. 88246		7. UNIT AGREEMENT NAME MCA
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) 1980' FSL & 1980' FWH of Sec. 26, T-17S, R-32E in Lea County, N. Mex.		8. FARM OR LEASE NAME MCA UNIT #4
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3960' DF	9. WELL NO. 188
		10. FIELD AND POOL, OR WILDCAT Mechanics G-5A Reven.
		11. S.C., 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	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETION	☐
SHOOT OR ACIDIZE	☒	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other) DEEPEN			☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(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.) *

It is proposed to deepen & acidize this well by the following procedure.

Clean out to TD if necessary. Run GR/N log from TD to 3200. Deepen by coring from 4192' to 4342' (approx). Treat 7th zone with 5,000 gals 15% NE acid. place well back on production. Work to commence 9-17-69

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

SIGNED [Signature] TITLE Adm. Section Chief DATE 9-15-69

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

SEP 16 1969
ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

VLL-5

MCA Partition