

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 057210

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*2. NAME OF OPERATOR
Continental Oil Company3. ADDRESS OF OPERATOR
Box 460 Hobbs, New Mexico 882404. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

660' FSL and 660' FEL of Sec 27

14. PERMIT NO.

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

3953' df

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit #3

9. WELL NO.

203

10. FIELD AND POOL, OR WILDCAT

Mali G-5A Reservoir

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

Sec 27, T-17S, R-32E

12. COUNTY OR PARISH

Lea

13. STATE

N. Mexico

18. 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 ☐Deepen 148' - inst Lcsz ☒

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 (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 perform remedial work on this well by the following procedures: Drill out 148' to new TD of 4300'. Set packer at 4200'. Treat w/ 3000 gals 28% HCL-NE acid. Set 4", 9.5#, J-55 Casing at 4060'. Cement w/ 200 sacks Class C cement woc 24 hours. Drill out plug and clean out to TD.

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

SIGNED

Robert Gault

TITLE

Administrative Supervisor

DATE

7-3-72

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

JUL 6 1972

ARTHUR R. BROWN
DISTRICT ENGINEER

USGS (5)

FILE

MCA (3)

*See Instructions on Reverse Side