

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

5. LEASE DESIGNATION AND SERIAL NO.

LC 057210

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit Bly3

9. WELL NO.

206

10. FIELD AND POOL, OR WILDCAT

Mali G-5A Repren

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

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

12. COUNTY OR PARISH

Lea

13. STATE

N. Mex

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, New Mexico 88240

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

At surface

14. PERMIT NO.

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

3971' gr

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 COMPLETION

ABANDON*

CHANGE PLANS

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.)

This well was forced by the following procedure:
let pkr at 3545' and tailpipe at 3976'. Frac'd w/ 40,000 gals treated produced water and 60,000# 20/40 sand at 15.5 BPM. Avg titg press was 4000 psi. Ran producing equipment and plowed back on production.

Test - before

Pmpd 56 BO and no wtr in 24 hrs.

Test - after

Pmpd 204 BO and 7BW in 24 hrs on 12-14-71.

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

SIGNED

[Signature]

TITLE Administrative Supervisor

DATE 12-16-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE

DEC 16 1971

USGS (5) File

MCA(3)

*See Instructions on Reverse

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

