

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instruction
verse side)

COPY TO O. C. C.

Form approved.
Budget Bureau No. 42-E1424

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 ☐	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 88240	9. WELL NO. 185
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1345' FSL & 1345' FEL of Sec. 27-175-32E in Lea County, New Mexico.	10. FIELD AND POOL, OR WILDCAT Malamar, Riposo H-1A-Pool
14. PERMIT NO.	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Sec. 27-T-175-R-32E
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3956' GL	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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Perforate additional pay

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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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 perforate additional pay by the following procedures.

Perforate w/ $3/8$ " 1 JSPF at 4212', 4200', 4189', 4151', 4137' and 4127'. Treat Perf w/ 1000 gals 15% LSTNE acid, 2250 gals brine or produced water containing 1 gal Adomall and 50# Adomite Aqua per 1000 gal. Pump another 9000 gals 15% LSTNE acid followed w/ 2250 gals of brine or produced water. Anticipated maximum pressure of 3900 - 4000 psi. at 9 BPM rate. Swab approx. 6 hrs. Re-run production tubing w/ SN to be a $\pm$ 4160'. Place on Production

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

SIGNED

Mr. E. H. Hinkle

TITLE Administrative Section Chief

DATE

8-29-69

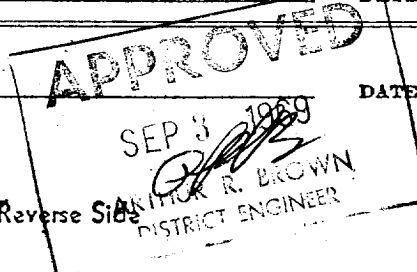
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MCA Antenna
File