

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Continental Oil Company		8. FARM OR LEASE NAME MCA
3. ADDRESS OF OPERATOR P.O. Box 460, Hobbs, N.M.		9. WELL NO. 207
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FWL & 660' FWL of Section 28, T-17S, R-32E, Lea County, New Mexico, NMPM.		10. FIELD AND POOL OR WILDCAT Baish-Maij-Pearsall Field Maljamar Pool
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3954' DF	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA S-28, T-17S, R-32E
		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	<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) Convert to water injection X			

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)			

(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.)*

In connection with the MCA Unit Waterflood it is proposed to convert the subject well to water injection using the following procedure:

1. Clean out to TD of 4125'.
2. Set 2 3/8" tubing W/retrievable packer at approx 3,500'.
3. Connect up for water injection down the tubing.

The USGS office in Roswell has granted approval for this conversion. Your approval to the above work is requested.

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

SIGNED [Signature] TITLE Staff Supervisor DATE 7-15-65

(This space for Federal or State office use)

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

USGS-5, NMOCC-2, LPT, PARTNERS -12

*See Instructions on Reverse Side

J. L. GORDON
ACTING DISTRICT ENGINEER