

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLIC
(Other instructions on
verse side)

LC 057210
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

2. NAME OF OPERATOR
Continental Oil Company

3. ADDRESS OF OPERATOR
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
660' FSL AND 1980' FEL SEC. 28

14. PERMIT NO.

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

5. LEASE DESIGNATION AND SERIAL NO.
LC-029509-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
MCA

8. FARM OR LEASE NAME
MCA UNIT

9. WELL NO.
208

10. FIELD AND POOL, OR WILDCAT
MALJ G-SA REPRESS

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
SEC 28, T17S, R32E

12. COUNTY OR PARISH 13. STATE
LEA NEW MEX

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 checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

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.)*

IT IS PROPOSED TO PLUG & ABANDON THIS WELL DUE TO COLLAPSED CASING AT APPROXIMATELY 2200'. THE FOLLOWING PROCEDURE WILL BE USED:

RUN TBG TO 2100' AND SQUEEZE COLLAPSED CSG W/ 200 SACKS CLASS "C" CEMENT W/ 3% SALT PER SACK. PULL OUT OF RETAINER AND SPOT 10 SACKS ON TOP OF RETAINER. SPOT 100' CEMENT PLUG AT SURFACE AND ERECT DRY HOLE MARKER. MUD BETWEEN PLUGS WILL CONTAIN 25 SACKS GEL PER 100 BARRELS

AMENDMENT: Place additional 150' cement plug in interval 600 to 750 feet.

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

SIGNED

Administrative Supervisor

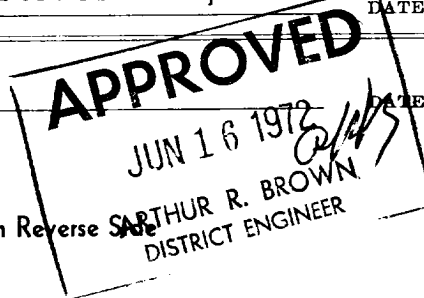
DATE 6-15-72

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



USGS (5) FILE MCA (3)

*See Instructions on Reverse Side