Form 9-331 (May 1963)

## UNIT > STATES SUBMIT IN TRIPLIC

Form approved. Budget Bureau No. 42-R1424.

| Nι | JF THE | INTERIOR | verse side) | <br>5. | LEASE | DESIG |
|----|--------|----------|-------------|--------|-------|-------|
|    | •      |          |             | 1 4    |       | •     |
|    |        |          |             |        |       |       |

| DEPARTMENT OF THE INTERIOR VETSE S  GEOLOGICAL SURVEY  | 5. LEASE DESIGNATION AND SERIAL NO.  LC 060199 0   |
|--|--|
| SUNDRY NOTICES AND REPORTS ON WEL (Do not use this form for proposals to drill or to deepen or plug back to a diffuse "APPLICATION FOR PERMIT—" for such proposals.)   |  |
| OIL GAS OTHER WATER Sujection  | 7. UNIT AGREEMENT NAME  M.C.A  |
| Continental oil comp   | Dong MCA Unitsly   |
| 3. ADDRESS OF OPERATOR  BOX 460 Holdes New M.  LOCATION OF WELL (Report location clearly and in accordance with any State require  | ments.* 10. FIELD AND FOOL, OR WILDCAT   |
| Location of well (Report location clearly and in adjutance with any state requires See also space 17 below.) At surface  660 FNL and 1980 FEL of S   | ec 29  10. FIELD AND FOOL, OR WILLIAM  Malj. G-SA Report  11. SEC., TA R., M., OR BLK. AND  SURVEY OR AREA   |
| 14. PERMIT NO.   15. ELEVATIONS (Show whether DF, RT, GR, etc.)  | Sec 7-9, T-175, L-32  12. COUNTY OF PARISH 13. STATE   |
| 3969° df   | Lea N.Me)  |
| 16. Check Appropriate Box To Indicate Nature of N  | otice, Report, or Other Data   |
| NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING WATE   | R SHUT-OFF REPAIRING WELL  |
| SHOOT OR ACIDIZE  ABANDON*  SHOOT  REPAIR WELL  CHANGE PLANS  (Other   | TING OR ACIDIZING  ABANDONMENT*  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 proposed work. If well is directionally drilled, give subsurface locations and men nent to this work.) *   |  |
| proposed work. If well is directionally drilled, give subsurface locations and ment to this work.).  **The proposed work of the proposed work of the proposed work of the proposed work. If well is directionally drilled, give subsurface locations and ment to this work.)  **The proposed work of the proposed work of the proposed work. If well is directionally drilled, give subsurface locations and ment to this work.)  **The proposed work of the proposed work of the proposed work of the proposed work. If well is directionally drilled, give subsurface locations and ment to this work.)  **The proposed work of the prop | d off w/50 suchs of  |
| t OHBP at 36/8. Squeezeld<br>so C cont. let plu at 39  | 138. Squeezed ON 3570  |
| 4' w/ 100 socks closs C cen  | nent. Dispreced 5000   |
| 4' w/ 100 socks closs Com<br>3550'. Set pocker at 3354'. S   | areged Treated OH  |
| 3550'. Set pocker a  | £ 3954. 1  |
| es coment : HCL-NE NO  | trock.   |
| 4' W/ 100 Socks Closed 4' W/ 100 Socks Closed at 3354. S<br>3550'. Set pocker at 3354'. Set pocker a<br>20 Ccement. Set pocker a<br>20 Po HCL - NE NE<br>1000 gals 20 90 HCL - NE Ne<br>Work Started - 1-14-72<br>Work Started - 1-14-72   | completed -1-31-72   |
| Worke state of   | Test-after   |
|  | Injected 650 BWPD  |
| Injected 353 BWPD  | sinjection -   |
| 18 I hereby certify that the foregoing is true and correct   | Supervisor DATE 2-2-72   |
| (This space for Federal or State office use)   |  |

APPROVED BY \_\_\_\_\_\_\_ CONDITIONS OF APPROVAL, IF ANY: : 1972 \*See Instructions on Reverse Side

TITLE .