

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE
(Other Instruc.
verse 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.)

5. LEASE DESIGNATION AND SERIAL NO.

LC 029405 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit Bty

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT

MCA Unit Bty

11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA

Sec. 19 T-15 R-2

12. COUNTY OR PARISH

Ada

13. STATE

NM

1.

OIL WELL ☐ GAS WELL ☒ OTHER

Water injection

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460, Hottel New Mexico 88240

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

060F NL + 1980 FEL Section 19, T-17S,
R-32E, Lea County, New Mexico

14. PERMIT NO.

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

3692 DF

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 COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Connect to water injection

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.)

Run tubing set packer @ 3540. Spaced well and
injection. Dated 2-20-68. Injected 50.8 m
@ 5.0 pressure in 24 hours

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

SIGNED

K. West Gault III

TITLE

District Engineer

DATE

4-25-68

(This space for Federal or State office use)

APPROVED

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APR 29 1968

DATE

J L GORDON

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side