

UNITED STATES
DEPARTMENT OF THE INTERIORSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved
Budget Bureau No. 42-R1424

GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.

LC-029405(A)

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 ☒ <i>Injection Well</i>	7. UNIT AGREEMENT NAME <i>MCA Unit Rept.</i>
2. NAME OF OPERATOR <i>Continental Oil Company</i>	8. FARM OR LEASE NAME <i>MCA Unit</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460, Hobbs, New Mexico</i>	9. WELL NO. <i>52</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>1980' FNL + 660' FEL of Sec. 19, T-17S, R-32E, Lea Co., N.M.</i>	10. FIELD AND POOL, OR WILDCAT <i>Lea, Lea Co., N.M.</i>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3955 BL</i>
	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>N.M.</i>

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)

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.)*

*Cleaned out shot hole 3744-4001.
Drilled new 6 1/4" hole to new TD 4060'.
Acidized w/500 gals 20 PC LSTNE acid over
bottom of new hole.
Reran Cement lined tubing, packer & tailpipe
and placed well back on injection.*

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

SIGNED

M. E. Yorkley

TITLE

Administrative Assistant

DATE

2-2-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

USGS(5) MCA(3) File

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

FEB 4 1971

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

RECEIVED

FEB 6 1971

OIL CONSERVATION COMM.
HOOVER, K. LL