

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.
LC-029405(2)

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 ☐

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460, Hobbs, NM 882404. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface**1980' FNL & 1980' FEL OF Sec. 19**

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA UNIT

9. WELL NO.

53

10. FIELD AND POOL, OR WILDCAT

M&T GSA Repress11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA**Sec. 19, T. 17S, R. 32E**

14. PERMIT NO.

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

3949' DF

12. COUNTY OR PARISH

Lea

13. STATE

NM

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETE ☐SHOOT OR ACIDIZE ☐ABANDON* ☐REPAIR WELL ☐CHANGE PLANS ☐

(Other)

Repair Csg Leak ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT* ☐

(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 Repair The Csg As Follows:
Kill Well with Treated Fresh Water and Pull Producing Equipment, Set Pkr & RBP and Pressure Test to Locate Csg Leak, Suspected to Be Above 2400'. Set RPP ± 50' Below Hole and Spot Sand on Top. Set Pkr 200' Above Hole. Establish Circulation and if cent Perf w/4TSPF. Pump 1000 SX Thix-sat Cmt, Follow w/200 SX class "C" CMT with 2% CACL₂. Down Annulus, Pump Treated Wtr and 1000 Gals. Halliburton Special Gelling Agent, 500 SX class "C" CMT with 2% CACL₂ Down the Through Csg Hole, WOC 24 Hrs. Drill out CMT and Pressure Test to 1000 PSI. Clean out to TD and Re-Run Producing Equipment, Return the well to Production.

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

SIGNED

Wm. A. Bettey

TITLE

Admin. Super.

DATE

3-2-77

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DATE

MAR 5 1977

BERNARD MOROZ

DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS-5, MCA 4, File

1971-1973

RECEIVED

1977

OL. COMM. 1977-1978
1977-1978