

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI
(Other instructions on re-
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <u>Water Injection</u>	7. UNIT AGREEMENT NAME <u>MCA</u>
2. NAME OF OPERATOR <u>Continental Oil Company</u>	8. FARM OR LEASE NAME <u>MCA Unit #1</u>
3. ADDRESS OF OPERATOR <u>Box 460 Hobbs, N. Mexico</u>	9. WELL NO. <u>54</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>1980' FNL and 1980' FWL of Sec 19</u>	10. FIELD AND POOL, OR WILDCAT <u>Moly G-5A Express</u>
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec 19 T-175 R-32 E</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3955' df</u>	12. COUNTY OR PARISH <u>Lea</u>
	13. STATE <u>N. Mexico</u>

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.) *

Drilled new $4\frac{3}{4}$ " hole from 3999' to 4020'.
Set packer at 3771' and treated OH 3808'-4020'
w/420 gals 28% acid. Set packer at 3916' and
treated OH 3916'-4020' w/2000 gals 28% acid.
Completed -1-21-73

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

SIGNED

Robert Bault III

TITLE

Admin. Supervisor

DATE

2-2-73

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

FEB 7 1973

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO