Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse 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:

1. OIL WELL ☐ GAS WELL ☒ OTHER Water injection

7. UNIT AGREEMENT NAME: NMCA

2. NAME OF OPERATOR: Continental Oil Company

8. FARM OR LEASE NAME: NMCA Unit Bty 1

3. ADDRESS OF OPERATOR: Box 460, Hobbs, New Mexico 88240

9. WELL NO.: 54

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1980 FN & WL, Section 19, T-17S, R-32E, Lea County, New Mexico

10. FIELD AND POOL, OR WILDCAT: Maljamar Grayburg SA

11. 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.): 3955 DF

12. COUNTY OR PARISH: Lea

13. STATE: N Mex

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Convert to water injection			☒
(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.)*

Ran tubing, Set Packer @ 3385. Placed well on injection. Date 2-16-68. Injecting 450 BW at 0 pressure in 24 hours.

Work to be started 4-25-68

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

SIGNED Robert Gaudill TITLE Dist. Engr. DATE 4-25-68

(This space for Federal or State office use)

APPROVED

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 29 1968

J L GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side