

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.
LC-029405 b
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 **Injection Well**

2. NAME OF OPERATOR **Continental Oil Company**

3. ADDRESS OF OPERATOR **P.O. Box 460, Hobbs, N.M. 88240**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface **660 FSL & FEL of Sec. 19, T-17S, R-32E, M-1, G-SA Rgr.**
Lea Co., N.M.

5. ELEVATIONS (Show whether DF, RT, GR, etc.) **3923 DJ**

6. UNIT AGREEMENT NAME **McA Unit Rgr.**

7. FARM OR LEASE NAME **McA Unit Rgr.**

8. WELL NO. **100**

9. FIELD AND POOL, OR WILDCAT **McA Unit Rgr.**

10. SEC., T., R., M., OR BLK. AND SURVEY OR AREA **Sec. 19, T-17S, R-32E**

11. COUNTY OF PARISH **Lea** 12. STATE **N.M.**

13. PERMIT NO.

14. 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) Deepen + Stimulate	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
(Other) ☐			

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.)

Work Done: Drilled new 6 1/4" hole from 3968' to 4040'. Spotted 1000 gals 15 PC 6X retarded acid over new hole. Bradenhead squeezed acid away. Ran 7" Baker Model A tension pkr on. 2 3/8" cement lined tubing. Displaced w/ trtd fresh wtr. Set pkr. at 3475' w/ 15 pts. tension. Placed well back on injection.

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

SIGNED

(This space for Federal or State office use)

TITLE

Administrative Super. DATE **3-2-71**

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

USGS(5) MCA(3) File

*See Instructions on Reverse Side

