

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions 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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ INJECTION WELL		5. LEASE DESIGNATION AND SERIAL NO. LC 029405 (b)	
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240		7. UNIT AGREEMENT NAME MCA	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWL OF SEC. 19		8. FARM OR LEASE NAME MCA UNIT 111	
14. PERMIT NO.		9. WELL NO. 56	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3925' DF		10. FIELD AND POOL, OR WILDCAT MALJ. G-SA REPRESS	
		11. SEC. T, R, M, OR BLK. AND SURVEY OR AREA SEC. 19, T-17S, R-32E	
		12. COUNTY OR PARISH LEA	
		13. STATE N.M.	

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 COMPLETION ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) INSTALL CASING ☒	

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.)*

Due to collapsed casing from 2933'-49'. the following work is proposed:
Run free point, cut & pull estimated 2925' 7" csq. Drill out & clean out to TD 3984'. Run full string of 4 1/2" 9.5# or 10.5# k-55 casing. Cement w/300 sks. Class "C" cement. Pressure test & if necessary, squeeze w/50 sks class "C" cement. Drill out OH BP & push to TD. Csq. to be set @ + 3570'.

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

SIGNED [Signature] TITLE SR. ANALYST DATE 2-6-75

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

USGP-5, MCA-3, File

*See Instructions on Reverse Side

APPROVED
FEB 7 1975
ARTIFICIAL LIFT DIVISION
DISTRICT ENGINEER