Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Water Injection Well

2. NAME OF OPERATOR
Continental Oil Company

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FNL & 1980' FEL, Sec. 20-17-32, Lea County, New Mexico.

5. LEASE DESIGNATION AND SERIAL NO.
LC 029405 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
McA

8. FARM OR LEASE NAME

9. WELL NO.
20

10. FIELD AND POOL, OR WILDCAT
Maljamar Grayburg

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 20, T-17S, R-32E

12. COUNTY OR PARISH
Lea

13. STATE
N.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4014 D.F.

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 Inj.			X
(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.)*

The following work was performed to convert subject well to water injection:

Pulled rods and pump. Tagged bottom at 3611' RKB. Ran [illegible] of tubing w/packer set at 3500'. Placed well on injection.

On test 2-15-67, injected 1107 BWPD at zero psig surface.

Work commenced and completed 2-10-67.

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

SIGNED [signature] TITLE Supervising Engineer DATE 3-7-67

(This space for Federal or State office use)

APPROVED

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 26 1967

USGS-5 PARTNERS-15 FILE-2

GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side