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.

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

7. UNIT AGREEMENT NAME: MCA Unit Expn.

2. NAME OF OPERATOR: Continental Oil Company

8. FARM OR LEASE NAME: MCA Unit Tract 1

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

9. WELL NO.: 62

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. 20, T-17S, R-32E, Lea County, N. M.

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

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

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3959 DF

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:				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			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.) *

Work done: Drilled new 6 1/8" hole to 4100'. Treated OH w/2100 gals 15 PE 6X retarded acid. Ran Baker tension pkr. & Cement lined tubing to 3415. Displaced hole w/fluid with & set pkr w/12 pt. tension. Placed well on injection.

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

SIGNED: M E Hoadley TITLE: Administrative Supvr. DATE: 3-11-71

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS (5) MCA (3) File

APPROVED FOR RECORD
MAR 15 1971
U. S. GEOLOGICAL SURVEY

*See Instructions on Reverse Side