

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other Instructions on reverse side)Form approved
Budget Bureau No. 42-1112

5. LEASE DESIGNATION AND SERIAL NO.

LC 029405(b)

6. 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 ☒ Water Injection

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

Box 460, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

660' FSL and 1980' FWL of Sec 19

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

3925' DF

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

Deepen - Same zone

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

SUBSEQUENT REPORT OF:

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)

It is proposed to deepen and stimulate this well by the following procedures. Go in hole w/ 6 1/8" bit and drill to new TD of 3975' (22'). Set packer at $\pm$ 3850 and ff tailpipe at 3960'. Treat w/ 3000 gal 15% HCL - NE acid in 2 equal stages. Divert between stages w/ 600 # benzoic acid mixed in 400 gal gelled water. Pull tbg, packer & tailpipe. Re-run cmt lined tbg & packer and place back on ~~injection~~ injection. This work commenced on 6-9-71 by verbal approval of Mr. Brown.

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

SIGNED

(This space for Federal or State office use)

TITLE Adm. Supervisor

DATE

6-9-71

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

JUN 10 1971

ARTHUR R. BROWN
DISTRICT ENGINEER

RECEIVED

JUN 15 1971

**OIL CONSERVATION COMM.
HOBBS, N. M.**