DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)
GEOLOGICAL SURVEY

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

2. NAME OF OPERATOR: Continental Oil Company

3. ADDRESS OF OPERATOR: 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: 1325' FNL & 1325' FWL, Section 28, T-17S, R-32E, Lea County, New Mexico

14. PERMIT NO.

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

5. LEASE DESIGNATION AND SERIAL NO.: LC 057210

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME: MCA

8. FARM OR LEASE NAME: MCA Unit

9. WELL NO.: 235

10. FIELD AND POOL, OR WILDCAT: Maljamar Repress (GSA) Pool

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 28, T-17S, R-32E

12. COUNTY OR PARISH: Lea

13. STATE: NM

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	X	MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE	X	ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT*	
REPAIR WELL		CHANGE PLANS					
(Other) Perforate			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.) *

To obtain a more efficient water injection distribution the following work is proposed.

Perforate 3774, 3781, 3806, 3809, 3873, 3879 and 3889.

Acidize perfs 3769-3954 with 4500 gallons 20% LSTNE acid.

Run injection test.

If injection rates are not satisfactory, sand frac as necessary.

Place on injection.

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

SIGNED Robert Faulk III TITLE Adm. Sec. Chief DATE 4-4-68

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS-5 Partners-15 File

APR 8 1968

*See Instructions on Reverse Side