

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on TC
version)Form approved
Federal Bureau No. 42-100

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 ☐	7. UNIT AGREEMENT NAME <i>MCA</i>
2. NAME OF OPERATOR <i>Continental Oil Company</i>	8. FIRM OR LEASE NAME <i>MCA Unit</i>
3. ADDRESS OF OPERATOR <i>P. O. Box 460, Hobbs, New Mexico 88240</i>	9. WELL NO. <i>254</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 11 below.) At surface <i>810' FSL + 2080' FEL of Sec 28.</i>	10. FIELD AND POOL, OR WILDCAT <i>Wadi G-SA</i>
11. PERMIT NO.	11. BFC, T, E, M, OR FILL AND SURVEY OR AREA <i>Sec. 28, T-17S, R-3E</i>
12. ELEVATIONS (Show whether DE, BY, OR, etc.) <i>3946' DF</i>	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>N.M.</i>

10. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	FULL 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) ☐	(Other) ☐
(Other) ☐			

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

Drilled out of the 8 7/8" casing with a 7 7/8" bit to 4100'. Ran and set 5 1/2" 14# J-55 casing and cemented with 640 sack class 'C' cement using a DV tool. WOC 24 hours. Top of cement behind casing 1500'. Tested casing with 1000 # for 30 minutes, held OK

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

SIGNED *M. E. [Signature]*TITLE *Adm. Section Chief*DATE *5-12-70*

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
MAY 14 1970
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

USGS-5 FILE

*See Instructions on Reverse Side

RECEIVED

MAY 19 1970
OIL CONSERVATION COMM.
HOBBS, N. M.