

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

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. NAME OF OPERATOR OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC 029405(6)	
2. ADDRESS OF OPERATOR CONTINENTAL OIL COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Box 460, HOBBS, N.M. 88240		7. UNIT AGREEMENT NAME MCA	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 125' FSL & 1295' FEL OF SEC. 20		8. FARM OR LEASE NAME MCA UNIT	
14. PERMIT NO.		9. WELL NO. 269	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3987' GR.		10. FIELD AND POOL, OR WILDCAT MALJ-G-SA REPRESS	
		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.	

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) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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.)*

It is proposed to re-perforate the Upper 7th zone to increase the producing rate & ultimate recovery by the following procedure:

Spot 150 gals. 15% acid 3875' - 3800'. Perf w/2 JSPPF 3856' - 75'. Re-run prod. lgpt.

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

SIGNED

[Signature]

TITLE

SR. ANALYST

DATE

6-25-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

USGS-5, MCA-4, File

JUN 26 1975
JIM SIMS
DISTRICT ENGINEER