

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions
verse 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME <i>MCA</i>	
2. NAME OF OPERATOR <i>CONTINENTAL OIL COMPANY</i>		8. FARM OR LEASE NAME <i>MCA Unit Bty. 2</i>	
3. ADDRESS OF OPERATOR <i>P. O. Box 460, Hobbs, N.M. 88240</i>		9. WELL NO. <i>293</i>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>1,345' FSL & 1,345' FWL of Sec. 29</i>		10. FIELD AND POOL, OR WILDCAT <i>MCA, G-SA Region</i>	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, CR, etc.) <i>3915' GR</i>	
		12. COUNTY OR PARISH <i>Lea</i>	
		13. STATE <i>N.M.</i>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <i>Polymer Water Shut off</i> <input checked="" type="checkbox"/>		(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.)*

A prepared Polymer water shut-off of the (G-S zone) Grayburg Sandstone formation is to be performed by the following procedure: Treat w/2400 bbls. fresh water containing 2.050% Polymer & 105% fracturing agent. Follow with 100 bbls. fresh water and overflush with 100 bbls. treated leave crude.

18. I hereby certify that the foregoing is true and correct
SIGNED *Robert Bault* TITLE *Division Office Manager* DATE *4-8-74*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

APR 8 1974

*See Instructions on Reverse Side

USGS-S, MCA-3, File