

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 057210

6. IF 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	7. UNIT AGREEMENT NAME MCA
2. NAME OF OPERATOR Continental oil Company	8. FARM OR LEASE NAME MCA Unit
3. ADDRESS OF OPERATOR Box 460 Hobbs, New Mexico	9. WELL NO. 301
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL and 1780' FEL of Sec 28	10. FIELD AND POOL, OR WILDCAT Triali G-SA Repers
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 28, T-17S, R-32E
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE Lea N. Mexico

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.)*

Spudded 11" hole on 8-22-72. Set 7 7/8", 24# casing @ 867'. Cemented w/ 250 sacks Class C cement w/ 4% gel and 2% CaCl. Followed w/ 125 sacks Class C cement w/ 2% CaCl. Cement circulated. WOC 24 hours. Tested casing w/ 800 PSI for 30 minutes, held O.K.

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

SIGNED

Robert Daulton

TITLE

Admin. Supervisor

DATE

8-28-72

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

SEP 1 1972

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

1150505, MCA(3) F:6

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CONGRESS

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