

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLIC
(Other instructions on
reverse 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 ☐

2. NAME OF OPERATOR

Continental oil Co.

3. ADDRESS OF OPERATOR

Box 460 Hobbs, N. Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

14. PERMIT NO.

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

1345' FSL and 25' FWL of Sec 28

3945' gr

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit Blyr

9. WELL NO.

324

10. FIELD AND POOL, OR WILDCAT

Moj G-SR Repress

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 28, T-17S, R-32E

12. COUNTY OR PARISH

Lea

13. STATE

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 12 1/4" hole on 9-28-72. Set 8 5/8" 20 # casing at 889'. Cemented w/ 500 sacks class C cement. Cement circulated. WOC 18 hours. Tested casing w/ 800 PSI for 30 minutes; held O.K.

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

SIGNED

M. E. Heckley

TITLE

Admin. Supervisor

DATE

10-25-72

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE

OCT 27 1972

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

11565(5) MCA(3) File