

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)Form Approved  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

LC-058698(4)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## SUNDAY 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. <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER                                                 | 7. UNIT AGREEMENT NAME<br>MCA                                           |
| 2. NAME OF OPERATOR<br>Continental Oil Company                                                                                                                              | 8. FARM OR LEASE NAME<br>MCA Unit                                       |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 460, Hobbs, NM 88240                                                                                                                    | 9. WELL NO.<br>339                                                      |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>1295' FSL and 2615' FWL of Sec 23 | 10. FIELD AND POOL, OR WILDCAT<br>MCA-5A Reservoir                      |
| 11. PERMIT NO.                                                                                                                                                              | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec 23 T-17S, R-32E |
| 12. ELEVATIONS (Show whether DF, RT, GA, etc.)<br>4012' est d.F.                                                                                                            | 12. COUNTY OR PARISH<br>Lea                                             |
|                                                                                                                                                                             | 13. STATE<br>NM                                                         |

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETION ☐SHOOT OR ACIDIZE ☐ABANDON\* ☐REPAIR WELL ☐CHANGE PLANS ☐

(Other)

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT\* ☐

(Other)

Note: Report results of multiple completion or 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 3-18-73. Drilled to 970' and set 8 5/8" 20 1/2 casing. Cemented w/ 500 sacks class C cement. Cement circulated WOC 18 hours and tested casing w/ 800 psi for 30 minutes, held o.k.

18. I hereby certify that the foregoing is true and correct.  
SIGNED Robert Paul Fox TITLE Admin. Supervisor DATE 4-6-73  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

ACCEPTED FOR RECORD

APR 11 1973

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side

USGS-5 FILE

MCA-3