Form 9-331
(May 1963)

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. OIL WELL ☐ GAS WELL ☐ OTHER Water Injection Well

2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR
Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FNL & 660' FWL of Sec. 30

5. LEASE DESIGNATION AND SERIAL NO.
LC 058697 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
MCA

8. FARM OR LEASE NAME
MCA UNIT

9. WELL NO.
133

10. FIELD AND POOL, OR WILDCAT
Maljamar G-SA Reprocess

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30, T-17S, R-33E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4039' DF

12. COUNTY OR PARISH
Lea

13. STATE
NM

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	X	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐				
(Other) Inst. Csg & Stim		X		(Other)			

(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.) *

In order to improve injection efficiency, the following work is Proposed: Drill out Fill & 37' of New Hole to TD 4265'. Run Csg. Insp. log to determine if Full String or 400' liner of 4½" OD 10.50# K-55 Csg is required. If Run Full String Set At 4060' and cmt w/ 300 sx class "C" cmt and 2% CA Cl2. If Liner. Set 3660-4060' & cmt w/ 40 sx class "C" cmt w/ 2% CA Cl2. Test Csg or Liner to 1000 PSI. Treat w/ 3000 Gals 15% Acid IN 2-Equal stages. Divert Between Stages w/ 400 Gals Gelled Brine Water. Run cmt Lined Tbg w/ 4½" OD Pkr Set AT ± 3830'. Return the well to Injection.

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

SIGNED Wm. R. Rutherford TITLE Admn. Supv. DATE 9-22-76

(This space for Federal or State office use)

APPROVED
DATE
SEP 24 1976
BERNARD MOROZ
ACTING DISTRICT ENGINEER

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

*See Instructions on Reverse Side

USGS-5, MCA-4, File