GEOLOGICAL SURVEY         SUNDRY NOTICES AND REPORTS ON WELLS?         (Do not use this form for proposals to drill or to deepen or plus back to a different reservoir.	Form approved. Budget Bureau No. 42-R1424. LEASE DESIGNATION AND SERIAL NO. <u>JC 031620 b</u> IF INDIAN, ALLOTTEE OR TRIBE NAME . UNIT AGREEMENT NAME V.M.F.U.
DEPARTMENT OF THEASY IERCOR verse side) C, GEOLOGICAL SURVEY         GEOLOGICAL SURVEY         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 "APPERATION FOR PERMIT—" for such proposals.)         I.         OTHER         2. MANE OF OFBEATOR         Continental Oil Company         3. ADDERS OF OFBEATOR         Box 460, Hobbs, New Mexico 88240         4         A MARE OF OFBEATOR         See also of of permators         See also of of permators         See also of officient location clearly and in accordance with any State requirements.*         See also of officient location clearly and in accordance with any State requirements.*         See also of officient location clearly and in accordance with any State requirements.*         See also space 17 below.)         Arrow Mexico N.M. P.M.         1980' FSL & 660' FEL, Sec . 14, T-20S, R-37E         Lea County, New Mexico N.M. P.M.         See also space 17 below.)         Arrow Exercise of Notice, Report, or Oth         NOTICE OF INTENTION TO:	JC 031620 b . IF INDIAN, ALLOTTEE OR TRIBE NAME . UNIT ACREEMENT 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.)         I.         OTHER         I.         OTHER         I.         OTHER         II.         OTHER         II.         OTHER         II.         OTHER         III.         OTHER         III.         OTHER         III.         OTHER         III.         OTHER         III.         OTHER         III.         OTHER         OTHER         OTHER         OTHER         OTHER         OTHER         OTHER         State of potestroe         State of potestroe         State all pr	. IF INDIAN, ALLOTTEE OR TRIBE NAME . UNIT AGREEMENT NAME
(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 CAS WELL OTHER       7         2.       MANE OF OFSELATOR WELL OF WELL OTHER       7         2.       MANE OF OFSELATOR Continental Oil Company       9         3.       ADDRESS OF OFSELATOR DOX HOOD OF WELL (Report location clearly and in accordance with any State requirements." Stat space 17 below.) At surface 1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E Lea County, New Mexico N.M.P.M. 16. ELEVATIONS (Show whether pr. st. gs. etc.) 3555' DF         1         16. Check Appropriate Box To Indicate Nature of Notice, Report, or Othe NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FKACTURE TREAT SHOOTING OR ACIDIZE REPAIR WELL (Other) Convert to Injection (Other) Convert to Injection X (Other) PROOF OF CONFLETE OFFRATIONS (Clearly state all pertinent details, and give pertinent dates, in proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical date for the above subject to To is proposed to convert the above subject to	
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OLL       GAS       CAS       OTHER         2.       MANE OF OFBLATOR       8         2.       MANE OF OFBLATOR       9         3.       ADDRESS OF OFBLATOR       9         Box 460, Hobbs, New Mexico 88240       1         4.       LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*       1         See also space 17 below.)       At surface       1         1980 * FSL & 660 * FEL, Sec . 14, T-20S, R-37E       1         Lea County, New Mexico N.M.P.M.       1         14.       PERMIT NO.       16.         14.       PERMIT NO.       16.         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Othen NOTICE OF INTENTION TO:         TEST WATER SHUT-OFF       PULL OR ALTER CASING         MULTIPLE COMPLETE       SHOOTING OR ACIDIZE         REPAIR WELL       CHANOB PLANS         (Other) CONVErt to Injection       X         (Other) CONVErt to Injection       X         17.       DESCRIBE PROPOSED OR CONFLETED OFENDANCENCE         REPAIR WELL       Chanob PLANS         (Other) CONVErt to Injection       X         (Other) CONVERT to Injectionally drilled, give subsurface locations and measured and true vertical d nent to this work.)*	
2. NAME OF OPERATOR       8         Continental Oil Company       9         3. ADDRESS OF OPERATOR       9         Box 460, Hobbs, New Mexico 88240       1         4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface       1         1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E       1         1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E       1         14. PERMIT NO.       15. ELEVATIONS (Show whether DF, BT, GR, etc.)         14. PERMIT NO.       15. ELEVATIONS (Show whether DF, BT, GR, etc.)         14. PERMIT NO.       15. ELEVATIONS (Show whether DF, BT, GR, etc.)         14. PERMIT NO.       15. ELEVATIONS (Show whether DF, BT, GR, etc.)         15. ELEVATIONS (Show whether DF, BT, GR, etc.)       1         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Other NOTICE OF INTENTION TO:         SUBSEQUENT       SUBSEQUENT         FRACTURE TREAT       MULTIPLE COMPLETE         SHOOTING OR ACIDIZE       MULTIPLE COMPLETE         REPAIR WELL       CHANOS PLANS         (Other)       (NOTE: Report results of Completion or Recompletion or Reco	
3. ADDRESS OF OPERATOR       9         Box 460, Hobbs, New Mexico 88240       14         4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface       14         1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E Lea County, New Mexico N.M.P.M.       15         14. PERMIT NO.       16. ELEVATIONS (Show whether DF, RT, GR, etc.)       1         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Oth NOTICE OF INTENTION TO:       SUBSEQUENT         TEST WATER SHUT-OFF       FULL OR ALTER CASING       WATER SHUT-OFF         FRACTURE TREAT       MULTIPLE COMPLETE       SHOOTING OR ACIDIZE         SHOOT OR ACIDIZE       ABANDON*       (Other)       (Other)         (Other)       CONVERT to Injection       X       (Other)         17. DESCRIPE PROPOSED OR COMPLETE OFFRATIONS (Clearly state all pertinent details, and give pertinen	. FARM OR LEASE NAME
<ul> <li>Socation of with (Report location clearly and in accordance with any State requirements." At surface <ul> <li>1980' FSL &amp; 660' FEL, Sec. 14, T-20S, R-37E</li> <li>1980' FSL &amp; 660' FEL, Sec. 14, T-20S, R-37E</li> <li>14. PERMIT NO.</li> </ul> </li> <li>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <ul> <li>3555' DF</li> </ul> </li> <li>16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Notice of INTENTION TO: <ul> <li>TEST WATER SHUT-OFF</li> <li>PULL OR ALTER CASING</li> <li>MULTIPLE COMPLETE</li> <li>ABANDON*</li> <li>(Other) CONVERT to Injection</li> <li>Clearly state all pertinent details, and give pertinent dates, inc proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical drive subject to Convert the above subject to Convert the convert the convert the convert to Convert the convert the convert the convert the convert the convert the convert to Convert the convert to Convert the convert the convert to Convert the convert the convert the convert to Convert the convert the convert to Convert the convert the convert to Convert the convert the convert the convert to Convert the convert to Convert the convert the convert to Convert the co</li></ul></li></ul>	SEMU Permian
At surface     1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E       1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E       Lea County, New Mexico N.M.P.M.       14. PERMIT NO.       15. ELEVATIONS (Show whether DF, RT, GR, etc.)       3555' DF       16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Oth       NOTICE OF INTENTION TO:       SUBSEQUENT       TEST WATER SHUT-OFF       FRACTURE TREAT       SHOOT OR ACIDIZE       REFAIR WELL       (Other)       CONVErt to Injection       17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, inc proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical d anent to this work.)*	<b>1</b> 6
1980' FSL & 660' FEL, Sec. 14, T-20S, R-37E         Lea County, New Mexico       N.M.P.M.         14. PERMIT NO.       15. ELEVATIONS (Show whether DF, BT, GR, etc.)         3555' DF       1         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Oth         NOTICE OF INTENTION TO:         SUBSEQUENT         TEST WATER SHUT-OFF         PRACTURE TREAT       POLL OR ALTER CASING         MULTIPLE COMPLETE       WATER SHUT-OFF         FRACTURE TREAT       MULTIPLE COMPLETE         ABANDON*       (Other)         CONVERT to Injection       X         17. DESCRIPTE PROPOSED OR COMPLETE OFFRATIONS (Clearly state all pertinent details, and give pertinent dates, incomposed work. If well is directionally drilled, give subsurface locations and measured and true vertical directionally drilled, give subsurface locations and measured and true vertical directional dates, incomposed work.)*	WHU FIELC
Lea County, New Mexico N.M.P.M. 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3555' DF 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REFAIR WELL (Other) Convert to Injection 17. DESCRIPTE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, incomposed work. If well is directionally drilled, give subsurface locations and measured and true vertical drive work.)*	Skaggs Gravburg S.A.
14. PERMIT NO.       15. ELEVATIONS (Show whether DF, RT, GR, etc.)       1         3555 * DF       1         16.       Check Appropriate Box To Indicate Nature of Notice, Report, or Other         NOTICE OF INTENTION TO:       SUBSEQUENT         TEST WATER SHUT-OFF       PULL OR ALTER CASING         WATER SHUT-OFF       PULL OR ALTER CASING         WATER SHUT-OFF       PULL OR ALTER CASING         SHOOT OR ACIDIZE       ABANDON*         REPAIR WELL       CHANOB PLANS         (Other)       CONVERT to Injection         17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, incompletion or Recompletion or	SURVEY OR AREA
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17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, inc proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical d nent to this work.)* It is proposed to convert the above subject to	multiple completion on Well
It is proposed to convert the above subject w	n Report and Log form.)
<pre>in connection with the Skaggs Pool waterflood using the 1. Kill gas zone w/oil. Pull tubing and ta: @ 3750'. 2. Retrieve Model "D" Packer. 3. Drill out cement &amp; CIBP @ 3850 (Top of Ce 4. Clean out to T.D. of 3916'. 5. Run cement lined tubing in tubing w/sled: injection packer, Set packer @ 3760'. 6. Swab Eumont Gas Zone thru sleding. Star Grayburg.</pre>	e following procedure. ilpipe from pkr. ement 3842') ing sleeve and t injecting into
A subsequent report will be submitted upon c	ompletion.
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CANNS	에 관계 보험 가 있었다. 이상 이상 방법 이 가 있는 것
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18. I hereby certify that the foregoing is true and correct SIGNED	DATE 4-10-67
(This space for Federal or State office use)	
	TO A MUTH
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	<b>DATE</b>
	and the second
*See Instructions on Reverse Side	
USGS (5) PAN AM-Hobbs-(2) ATL-Ros-(2) CALIF-Mid-(	

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