

UNITED STATES
DEPARTMENT OF THE INTERIOR
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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY
3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FNL + 1980' FGL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) conv. to injection ☒

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐

RECEIVED

JAN 17 1979

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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.)*

It is proposed to convert subject well to injection as follows:

Rig up, kill well.

Fish for standing valve, POOH w/ prod egpt

C.O. to 9040' if NECESS.

RUN inj. egpt., circ. well bore w/ 170661s per fluid

place well on injection

NMOCC app'l R-5632

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED W. A. Burkhead TITLE Admin. Sgr

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

USGS S

NMOCC 4

File

*See Instructions on Reverse Side

5. LEASE
LC 031695 (b)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
NMOCC
8. FARM OR LEASE NAME
Warren Unit McKee
9. WELL NO.
23
10. FIELD OR WILDCAT NAME
Warren McKee
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 29 T20S R38E
12. COUNTY OR PARISH
LEA
13. STATE
N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

APPROVED
AS AMENDED
DATE
JAN 17 1979
ACTING DISTRICT ENGINEER

U. S. Geological Survey
P. O. Box 1157
Hobbs, New Mexico 88240

Well No. 23 Warren Unit McKee

HOBBS DISTRICT

CONDITIONS OF APPROVAL:

1. The Hobbs office (telephone (505) 393-3612) is to be notified when workover operations are to be commenced.
2. Blowout prevention equipment is required.
3. An injection profile survey is required when fill-up is obtained and surface injection pressure becomes necessary. A copy of the survey, together with your analysis, must be furnished this office. All steps necessary to ensure that the injected water enters only the proposed injection interval must be timely taken.
4. The surface injection pressure at the wellhead is not to exceed 1800 psi unless it can be established that a higher pressure will not result in fracturing of confining strata and such higher pressure is approved.