

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

5. LEASE DESIGNATION AND SERIAL NO.

LC 030133(b)

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 ☒ WATER INJECTION WELL2. NAME OF OPERATOR  
CONTINENTAL OIL COMPANY3. ADDRESS OF OPERATOR  
Box 460, Hobbs, N.M. 882404. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

660' FSL &amp; 1980' FEL OF SEC. 33

14. PERMIT NO.

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

3502' DF

7. UNIT AGREEMENT NAME

N.M.F.U.

8. FARM OR LEASE NAME

SOUTH EUNKE UNIT

9. WELL NO.

62

10. FIELD AND POOL, OR WILDCAT

SOUTH EUNKE SEVEN RIVERS QUEEN

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

SEC. 33, T. 22S, R. 36E

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐  
☐  
☐  
☐

PULL OR ALTER CASING

☐  
☐  
☐  
☐  
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐  
☐  
☐  
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☐

REPAIRING WELL

☐  
☐  
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☐  
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other) CONVERT TO INJECTION

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

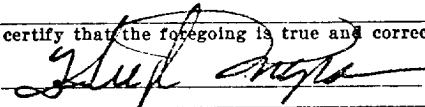
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Cleaned out to 3808'. Ran 2 3/8" cement lined tubing & set packer @ 3560'. Tested injection rate @ 400 BWPD on vacuum. Work completed on 8-28-74.

This waterflood authorized by NMOC Order No. 4068.

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

SIGNED



TITLE

SR. ANALYST

DATE

9-6-74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, Partners-20, File \*See Instructions on Reverse Side

