

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032573 (4)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

N M FV

8. FARM OR LEASE NAME

Ellis A-15

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Barre Shelly Sandstone

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

Sec. 15 T. 22S R. 37E

12. COUNTY OR PARISH 13. STATE

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 ☒ Convert to Injection

2. NAME OF OPERATOR

Continental Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 460, Haller, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

330' FSL & 400' FEL of Sec. 15

14. PERMIT NO.

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

3554' DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Convert to Injection

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

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

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

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 this well to injection by:

1. Pulling producing equipment from well.
2. Run 2 3/8" cement lined tubing w/ packer. Packer to be set at \pm 3320'.
3. Well to be placed on injection.

This waterflood authorized by NMOC Order No. R-4630

I hereby certify that the foregoing is true and correct

SIGNED

S. K. Allerton

TITLE

Alternate for
Division Office Manager

DATE 11-19-73

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
APR 19 1974
ANTHONY R. LAMBERT
DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS-5, NMOC-4, File