

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other Instructions on
verse side)

Form approved,
Budget Bureau No. 42 R1421.

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, Ho BBS, NM 88240*

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
490' FSL & 370' FEL OF SEC. 35

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3108' DF

5. LEASE DESIGNATION AND SERIAL NO.
NM-02791 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
North El Mar Unit

9. WELL NO.
52

10. FIELD AND POOL, OR WILDCAT
El Mar Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 35, T-26S, R-32E

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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

IT IS Proposed to Convert This Well to Injection as Follows;

- 1. Pull Producing Equipment From Well.*
- 2. Clean out any Fill Above 4606' TO TD.*
- 3. Run Plastic Lined Tbg With Packer, Packer. To Be Set AT \pm 4500'.*
- 4. Well To be Placed on Injection.*

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

SIGNED *Wm. D. Rutherford* TITLE *Admin. Supv.*

DATE *2-2-77*

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
FEB 7 1977
BERNARD MCROZ
DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS-5, Partners-15, File.