Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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

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 WELL

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: CONTINENTAL OIL COMPANY

8. FARM OR LEASE NAME: NORTH EL MAR UNIT

3. ADDRESS OF OPERATOR: BOX 460, HOBBS, N.M. 88240

9. WELL NO.: 20

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1980' FSL & 660' FWL OF SEC. 30

10. FIELD AND POOL, OR WILDCAT: EL MAR DELAWARE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: SEC 30 T-26 S, R-33 E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3111' GR

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:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) CONVERT TO INJECTION			☒
(Other)				(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.)*

This well was converted to water injection by cleaning out to TD 4719' and running cement lined tubing w/ retention ptr. @ 4610'.

Work started 3-12-75. completed 7-1-75

This Waterflood authorized by N.M.O.C.C. Order No. R-4629 & R-4630 dated 9-13-73.

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

SIGNED: [signature] TITLE: SR. ENGR. DATE: 10-10-75

(This space for Federal or State office use)

APPROVED BY: _____ TITLE: _____ DATE: _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
OCT 20 1975
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

1565-5, Partners-9, File

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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

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 Well

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Continental Oil Company

8. FARM OR LEASE NAME
North Eal Mar Unit

3. ADDRESS OF OPERATOR
P.O. Box 460, Hobbs, New Mexico 88240

9. WELL NO.
20

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1,980' FSL & 660' FWL, of Sec. 30.

10. FIELD AND POOL, OR WILDCAT
Eal Mar Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30 T-26S, R-33E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3,111' GR

12. COUNTY OR PARISH
Lea

13. STATE
N. Mex.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐				
(Other) Convert to Injection			X	(Other)			

(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 by:

1. Pulling producing equipment from well.
2. Clean out any fill above 4,683' to TD 4,719'.
3. Run cement lined tubing with packer; packer to be set at ± 4,610'.
4. Well to be placed on injection.

This waterflood authorized by N.M.O.C.C. Orders No. R-4629 & R-4630; both orders dated 9-13-73

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

SIGNED [signature] TITLE Division Office Manager DATE 3-14-74

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 22 1974
ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS-5, Partners-15, File