

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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, Hobbs, N.M. 88240**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
990' FNL & 330' FNL OF SEC. 30

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3146' DF

5. LEASE DESIGNATION AND SERIAL NO.
LC 065880

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
NORTH EL MAR UNIT

9. WELL NO.
4

10. FIELD AND POOL, OR WILDCAT
EL MAR DELAWARE

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

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 ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
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.) *

This well was converted to water injection by cleaning out to TD 4704' and running cement lined tubing w/ retention pkr. @ 4630'.

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

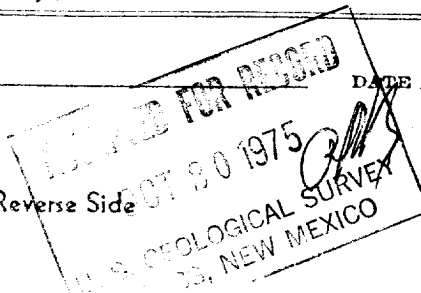
SIGNED [Signature] TITLE SR. ANALYST DATE 10-10-75

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

1565-5, Partners-9, File



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.

LC-065880

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 into different reservoir.
Use "APPLICATION FOR PERMIT" for each proposal.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Continental Oil Company

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

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

990' FNL + 330' FWL of Sec. 30

14. PERMIT NO.

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

3146' DF

UNIT AGREEMENT NAME

North El Mar Unit

8. FARM OR LEASE NAME

North El Mar Unit

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

El Mar Delaware

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

Sec. 30, T-26S, R-33E

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:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

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☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☐
☒

(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.)

Status of Well: Shut-In

Approximate date that temp. aban. commenced: 1-1-74

Reason for temp. aban.: Uneconomic

Future plans for Well:

will convert to injection

This approval of temporary
abandonment expires Dec 1, 1975

Approximate date of future W. O. or plugging: 1st QTR. 1975

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

SIGNED

TITLE Division Office Manager

DATE

10/30/74

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

USGS-5

*See Instructions on Reverse Side
N. El Mar Partners (9) file

NOV 1 1974
JIM SIMS
JIM SIMS
ACTING DISTRICT ENGINEER

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

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 ☒ <i>Water Injection Well</i>	5. LEASE DESIGNATION AND SERIAL NO. <i>LC-065830</i>
2. NAME OF OPERATOR <i>Continental Oil Company</i>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>P.O. Box 460 Hobbs, New Mexico 88240</i>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>990' FNL & 330' FWL of Sec. 30</i>	8. FARM OR LEASE NAME <i>North Ed Mar Unit</i>
14. PERMIT NO.	9. WELL NO. <i>4</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3146' DF</i>	10. FIELD AND POOL, OR WILDCAT <i>Ed Mar Delaware</i>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 30 T-26S R-33E</i>
	12. COUNTY OR PARISH <i>Red</i>
	13. STATE <i>N. Mex.</i>

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 ☐(Other) *Convert to Injection*

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(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 4,692' to TD 4,704'.
3. Run cement liner tubing with fusher; fusher to be set at $\pm$ 4,630'.
4. Well to be placed on injection.

This waterflood authorized by N.M.O.C. Orders No. R-4629, & R-4630, both orders dated 9-15-73.

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

SIGNED *Robert G. G. G.*TITLE *Division Office Manager*DATE *3-14-74*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

MAR 22 1974

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

USGS-5, Partners-15, L.12