

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*

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

*660' FNL & 660' FWL of Sec. 31*

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

*North Ed Mar Unit*

9. WELL NO.

*41*

10. FIELD AND POOL, OR WILDCAT

*Ed Mar Delaware*

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

*Sec. 31, T-26S R-33E*

14. PERMIT NO.

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

*3105' KB*

12. COUNTY OR PARISH

*Lin*

13. STATE

*N. Mex.*

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)

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

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.)\*

*It is proposed to convert this well to injection by:*  
*1. Pulling producing equipment from well.*  
*2. Clean out any fill above 4,689' to PD 4,709'.*  
*3. Run cement lined tubing with packer; packer to be set at  $\pm$  4,590'.*  
*4. Well to be placed on injection.*

*This waterflood authorized by N.M.D.C.C. Orders no. R-4629 or R-4630; both orders dated 9-13-73.*

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

SIGNED

*Robert Gene Criss*

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

MUR R. BROWN  
DISTRICT MANAGER

\*See Instructions on Reverse Side

*USGS-5, Partners-15; File*