

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRI
(Other Instruction
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 ☒ <u>water injection well</u>	5. LEASE DESIGNATION AND SERIAL NO. <u>MM 02791 A</u>
2. NAME OF OPERATOR <u>Continental Oil Company</u>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>P. O. Box 460, Hobbs, New Mexico 88240</u>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface</u> <u>1935' FNL + 2090' FWL, Sec. 31, T-26S, R-3E</u>	8. FARM OR LEASE NAME <u>Payne</u>
14. PERMIT NO.	9. WELL NO. <u>12</u>
15. ELEVATIONS (Show whether DF, RT, CR, etc.) <u>3113' DF</u>	10. FIELD AND POOL, OR WILDCAT <u>Elmer Delaware</u>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 31, T-26S, R-3E</u>
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.)	12. COUNTY OR PARISH <u>Lea</u>
	13. STATE <u>N. Mex.</u>

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 ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) Convert to W.I.W.

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.)

This well was converted to a water injection well by the following procedure:

Cleaned out fill from 4738' to 4795. Ran 2 3/4" cement lined tubing with packer, and set packer at 4571' with 10,000# tension. Placed well on injection.

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

SIGNED Robert Gault III TITLE Administrative Section Chief

DATE 12-10-68

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE

DEC 12 1968

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.

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 ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Continental Oil Co.</i>	8. FARM OR LEASE NAME <i>Payne</i>
3. ADDRESS OF OPERATOR <i>Box 460, Hobbs, N. Mex.</i>	9. WELL NO. <i>12</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>1935' FNL + 2090' FWL, Sec. 31, T-26S, R-33E, Lea County, N. Mex.</i>	10. FIELD AND POOL, OR WILDCAT <i>Cl Mac Delaware Pool</i>
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 31, T-26S, R-33E</i>
15. ELEVATIONS (Show whether DF, RT, CR, etc.) <i>DF 3113'</i>	12. COUNTY OR PARISH <i>Lea</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	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETION	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other) <i>Convert to WIW</i>	☒		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(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 a water injection well by the following procedure:

Clean out well if necessary. Run 2 3/4" cement lined tubing with packer, and set packer at approximately 4570'. Place well on injection.

Permission to convert this well was given under order NO. R 3540.

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

SIGNED *M. E. Brockley*

TITLE *Adm. Section Chief*

DATE *12-3-68*

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DEC 4 1968

A. R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side