

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☐ other injection
2. NAME OF OPERATOR
Conoco Inc.
3. ADDRESS OF OPERATOR
P.O. Box 460, Hobbs, N.M. 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL @ 660' FWL
AT TOP PROD. INTERVAL: ✓
AT TOTAL DEPTH: ✓
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
- FRACTURE TREAT ☐
- SHOOT OR ACIDIZE ☒
- REPAIR WELL ☐
- PULL OR ALTER CASING ☐
- MULTIPLE COMPLETE ☐
- CHANGE ZONES ☐
- ABANDON* ☐
- (other) ☐

SUBSEQUENT REPORT OF:

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

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U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5. LEASE
LC-0301336
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
N.M.F.U.
8. FARM OR LEASE NAME
South Eunice Unit
9. WELL NO.
57
10. FIELD OR WILDCAT NAME
Eunice 7 Rivers Queen Sa.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33, T-22S, R-36E
12. COUNTY OR PARISH
Lea
13. STATE
N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone isolation on Form 9-330.)

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 clean out, reperf., & acidize subject well as follows:
MIRU & Kill well. Clean out well to 3775'. Spot 168 gal.
15% HCl-NE-FE from 3764' to 3600'. Perf. Queen formation @
3628'-3638', 3690'-3700', 3706'-3714', 3756'-3764' w/ 1 JSPP
(40 holes). Acidize Queen perfs from 3628'-3764' w/
4200 gal. 15% HCl-NE-FE. Flush & swab well & return to injection.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

John A. [Signature]

TITLE

Admin. Supervisor

DATE

2/20/86

(This space for Federal or State office use)

APPROVED

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:USGS-5
NMFU-4
FILE

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

OIL CONSERVATION DIV.

FEB 26 '80

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