

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL & GAS COMMISSION
SUBMIT IN TRIPPLIC.
(Other instructions on
reverse side)
88240

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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

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 and in accordance with any State requirements.*
See also space 17 below.)
At surface **Unit 0**
990' FSL & 1650' FEL

14. PERMIT NO.
30-025-04299

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

5. LEASE DESIGNATION AND SERIAL NO.
LC-030143(b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
Reed B

9. WELL NO.
6

10. FIELD AND POOL, OR WILDCAT
Eumont Yates 7 Rivers Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 23-205-36E

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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) open additional pay <input checked="" type="checkbox"/>	

(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.)*

MIRU on 6/20/85. Drill to 3834'. MIRU Ryco and string shot 3830'-3730', 3700'-3672' w/200 grains/ft. CO from 3833'-3834'. Spot 3 bbl 15% HCL acid from 3660'-3530'. MIRU CRL & run GR depth control log 3836'-3500'. WIH w/ 4" perforating gun & shot 2 JSPP @ 3553', 55', 65', 71', 74', 76', 90', 95', 3600', 02', 04', 07', 09', 13', 30', 48', 55', 57', 63', 64', 3667', (total of 42 holes). WIH w/ per and set @ 3488'. Acidize perfs in 2 equal stages. Pumped a total of 88 bbls, 15% HCL acid w/ 30% checker-Sol and divert w/ 4 bbl gelled treated brine w/ guar gum & 88 lbs rock salt, Flush w/ 21 bbl brine. Pumped scale sqz into Queen formation & overflush. WIH w/ pump, rig down. Test pumped 0 BO, 37 BW, & 38 MCF on 7/6/85.

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

SIGNED *Kevin L. Vogel* TITLE Administrative Supervisor DATE 9-12-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 19 1985

*See Instructions on Reverse Side

RECEIVED

SEP 28 1985

O.C.D.
HOBBS OFFICE