

UNITED 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.)

RECEIVED

1. oil ☒ well gas ☐ well other ☐  
2. NAME OF OPERATOR  
RB Operating Company  
3. ADDRESS OF OPERATOR  
2412 N. Grandview, Suite 201, Odessa, TX 79761  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980 FSL & 1651 FEL  
AT TOP PROD. INTERVAL: same  
AT TOTAL DEPTH: same

NOV 29 '90

O. C. D.  
ARTESIA OFFICE

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  
TEST WATER SHUT-OFF ☐ ☐  
FRACTURE TREAT ☐ ☒  
SHOOT OR ACIDIZE ☐ ☒  
REPAIR WELL ☐ ☐  
PULL OR ALTER CASING ☐ ☐  
MULTIPLE COMPLETE ☐ ☐  
CHANGE ZONES ☐ ☐  
ABANDON\* ☐ ☐  
(other) ☐ ☐

5. LEASE  
NM 32636  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Amoco 11 Federal  
9. WELL NO.  
4  
10. FIELD OR WILDCAT NAME  
E. Loving (Delaware)  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 11-T23S-R28E  
12. COUNTY OR PARISH 13. STATE  
Eddy Texas  
14. API NO.  
30-015-26495  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3001 KB

(NOTE: Report results of multiple completion or zone change 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.)\*

11/2/90 Cleaned out to 6295'. Ran CBL-CCL from 6295-4000'. Perforated Delaware from 6108-28 & 6135-6155'.

11/3/90 Acidized perforations w/ 1500 gallons HCL - Fraced perforations w/ 14,500 gallons gelled water w/ 25000# sand.

11/4/90 Flowing back frac fluid and testing.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_

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

SIGNED James D. Hight TITLE Sr. Prod. Engineer DATE 11/8/90

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

C/SF

RECEIVED

NOV 13 10 00 AM '90