

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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.)

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. See space 17 below.)
AT SURFACE: *660' FNL & 1980' FWL*
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

5. LEASE
LC-031740 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
N.M.F.U.

8. FARM OR LEASE NAME
Meyer B-8

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Eunice Monument G-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 8, T-21S, R-36E

12. COUNTY OR PARISH
Lea

13. STATE
N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

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:

RECEIVED
DEC 19 1979
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

(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.)*

MIRU 12-10-79. Poot w/ production equipment. Tagged for fill @ 3890' (T.D.). Set treating phr. @ 3800'. Acidized in two stages w/ 5000 gal. 15% HCl-NE-FE. Diverted between stages. Flushed w/ 20 bbls. KCl water. Pumped in 4 drums scale inhibitor mixed w/ 40 bbls. TFW. Flushed w/ TFW. With w/ hbq., setting hbq. @ 3864' & SN @ 3833'. Returned well to production.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *Wm. T. Butterfield* TITLE *Admin. Supervisor* DATE *12/17/79*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS-5
NMFLU-4
FILE

J. S. [unclear]
HOBBS, NEW MEXICO

*See Instructions on Reverse Side