

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 below.)  
AT SURFACE: **660' FNL & 2010' FWL**  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

LIVED  
NOV 3 1980  
U.S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

5. LEASE  
**LC-057210**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
**MCA**

8. FARM OR LEASE NAME  
**MCA Unit File 2**

9. WELL NO.  
**115**

10. FIELD OR WILDCAT NAME  
**Maljamar G-SA**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
**Sec. 28, T-17S, R-32E**

12. COUNTY OR PARISH **LEA** 13. STATE **NM**

14. API NO.

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

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <input type="checkbox"/>	<input type="checkbox"/>

(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. Tag for fill. 800Hw/rods & tbg. 611Hw/bit, jet sub, DC's, & workstring. CO to 4070'. Circ w/TFW. 800H. 611Hw/ treating pkr. set at 3520'. Pump 800 gals. 15% HCl-NE-FE. Pump 200 gals. acid. Pump 500 gals. diverting agent (10#/gal brine, 20# guar gum, 250# rock salt, 250# Benzoic acid.) Pump 1000 gals acid followed by 500 gals. diverting agent. Pump 1000 gals. acid. Flush w/25 bbls. TFW. Swab load back. Place well on production, and test.

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

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

SIGNED W. A. Rutherford TITLE Administrative Supervisor DATE 10/31/80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
NOV 5 1980  
for DISTRICT SUPERVISOR

USGSS  
MCA 4  
File