

U. S. DEPT. OF THE INTERIOR
B. O. BOX 460
ROSWELL, NEW MEXICO 88240

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 ☒ gas ☐ other ☐
well well well
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: 1650' FNL & 330' FEL
AT TOP PROD. INTERVAL: —
AT TOTAL DEPTH: —

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

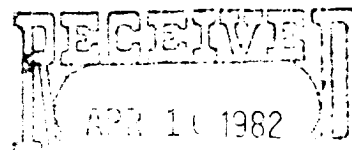
- | REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|---|-------------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input checked="" 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"/> |

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 4/24/80. Set CIBP at 3649' w/ 1sx cnt on top. Set pkr at 3000'. Acidized w/ 3000 gals. 15% HCL-NE acid. Pumped 4BOPD, 24BWPD, 168 McFPD on 2/10/82.

5. LEASE
NM-1151
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
NMFU
8. FARM OR LEASE NAME
Sanderson B-1
9. WELL NO.
2
10. FIELD OR WILDCAT NAME
Eumant Yates Seven Rivers Queen
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 10, T-20S, R-36E
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

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



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

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

SIGNED Wm. A. Butterfield TITLE Administrative Supervisor DATE April 14, 1982

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

PETER W. CHESTER

JUN 14 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

See Instructions on Reverse Side

RECEIVED

JUN 16 1982

D. C. D.
HOBBY OFFICE