

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

P. O. BOX 1980

HOBBS, NEW MEXICO

LC-031622 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

SANDERSON A

9. WELL NO.

8

10. FIELD OR WILDCAT NAME

EUNICE MONUMENT G/SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC. 14, T-20S, R-36E

12. COUNTY OR PARISH

LEA

13. STATE

NM

14. API NO.

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back total 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: 330' FNL + 1650' 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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) RE-PERF SAME INTERVAL ☒

(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 8/26/83. CO 3857'-3861'. SPOTTED 150 GALS 15% HCL-NE-FE @ 3860'. PERF W/4 JSPF @ 3691'-96' + 3765'-69'. ACIDIZED W/30 BBLs 15% ACID. FLUSHED W/24 BBLs TFW. SWBO. INHIBITED W/1 DRUM CHEMICAL IN 25 BBLs TFW. FLUSHED W/120 BBLs TFW. PUMPED 73 BO, 51 BW, + 120 MCF IN 24 HRS 9/6/83.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

Wm A. Bratterfield

TITLE

Administrative Supervisor

DATE

9/27/83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 28 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO