

(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' FSL & 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 • ☐

## FRACTURE TREAT

SHOOT OR ACIDIZE

## REPAIR WELL

PULL OR ALTER CASING

**MULTIPLE COMPLETE**

## CHANGE ZONES

ABANDON\*

(other)

RECEIVED  
DEC 01 1981

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

OIL & GAS  
U.S. GEOLOGICAL SURVEY

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (including, but not limited to, operation 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 7/16/81. String shot open hole from 3761'-3861'. Ran GR-CCL-CNL logs. Perf w/ 2 JSPF at 3648'-3716'. CO to 3865'. Acidize w/ 150 bbls 15% HCL-NE-FE, diverting w/ rock salt and benzoic acid. Flush w/ 18 bbls 10ppg brine. Ran production equipment. Tested 8/19/81: 680, 13BW, 24MCF

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

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

SIGNED Wm G. Dwyer TITLE Administrative Supervisor DATE November 25, 1981

(This space for Federal or State office use) REQUESTED FOR RECORD

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

**TITLE**

DATE \_\_\_\_\_

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