

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ INJECTION Other

2. Name of Operator

CONOCO, INC.

3. Address and Telephone No.

10 Desta Dr., Suite 100W, Midland, Texas 79705-4500, 915 686-5424 915 684-6381

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Surface: 1980' FSL & 660' FWL Sec 14, T20S, R37E, Unit Ltr L
TD: same as above

7. If Unit or CA, Agreement Designation

8. Name of Lease & Well

SEMU Eumont
Well #66

9. API Well #

30 025 06096

10. Field and Pool, or Exploratory Area

Eumont Yates 7 Rvrs Qn (Pro Gas)

11. County or Parish, State

Lea, NM

12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment ☐ Change of Plans
☐ Recompletion ☐ New Construction
☐ Plugging Back ☐ Non-Routine Fracturing
☐ Casing Repair ☐ Water Shut-Off
☐ Altering Casing ☐ Conversion to Injection
☒ Lower tbq/acidize ☐ Dispose Water

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

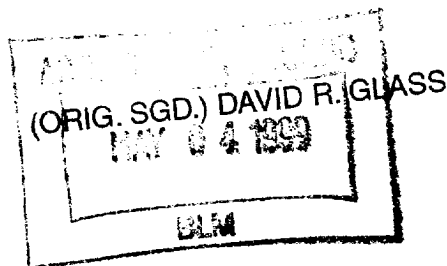
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

2-17-99: MIRU, killed well w/10 bbl 2% KCL, NUBOP, POOH, fill @ 3709', RIH hydrotesting tbq, landed tbq @3655', NDBOP, NU wellhead, SION.

2-19-99: Acidized Eumont w/500 gals 15% NEFE HCL & 10 bbls 2% KCL, RIH w/swab, fluid level @ 3000'. SION.

2-20-99: Swabbed, fluid level @ 3200', swabbing.

2 3/8" tubing lowered from 3484' to 3655'.



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

Signed

Ann E. Ritchie
Title REGULATORY AGENT

Date 4-27-99

(This space for Federal or State office use)

Approved by

Chris Williams
Title DISTRICT 1 SUPERVISOR

Date MAY 11 1999

Conditions of approval, if any.

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