

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

P. O. BOX 1980

HOBBS, NEW MEXICO

5. LEASE

86240-031621 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

BRITT B

9. WELL NO.

11

10. FIELD OR WILDCAT NAME

MONUMENT TUBB

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

SEC. 15, T-20S, R-37E

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 into 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 DIST. 6 N. M.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY IN space 17 below.)

AT SURFACE: 660' FSL + 1980' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

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(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 8/6/83. SET PKR @ 6297'. SQUEEZED TUBB PERFS 6454'-6511' w/ 75 SXS CLASS "H". REL PKR. DO CMT 6386'-6511'. PRESSURE TESTED, WOULD NOT HOLD. SET PKR @ 6297'. SQUEEZED AGAIN w/ 75 SXS CLASS "H". DO CMT + CIBP TO 6514'. CO TO 6655'. TESTED OK. SPOTTED 10 BBLS 15% ACID 6398'-6644'. PERF w/ 1 JSPF @ 6398', 6403', 11', 17', 20', 29', 34', 38', 41', 57', 69', 79', 85', 97', 6502', 17', 25', 32', 36', 44', 65', 6632', 38', + 6639'. SPOTTED 48 BBLS 15% ACID ACROSS PERFS. FLUSHED w/ 36 BBLS TFW. ACID FRAC w/ 210 BBLS 15% ACID, 150 BBLS GELLED FLUID PAD, + 142 BBLS FLUSH. SWBD. RAN PROD. EQUIP. PUMPED 8 BO, 20 BW, + 38 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. Butler 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

RECEIVED
SEP 30 1993
O.C.D.
HOBBS OFF