

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Other instructions
reverse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐ temp. shut-in	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR CONOCO INC.	8. FARM OR LEASE NAME SEMU Permian
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240	9. WELL NO. 34
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit J	10. FIELD AND POOL, OR WILDCAT Skaggs Grayburg
14. PERMIT NO. 30-025-07820	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19-205-38E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 1980' FSL & 1980' FEL	12. COUNTY OR PARISH Lea
	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(Other) **Repair csq & acidize**

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of completion of any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and pertinent to this work.)

- ① MIVU, POOH w/ rods & pump. Clean out to 3696'
- ② Isolate casing leak and repair w/ the appropriate volume of cmt
- ③ Clean out & jet wash to PBD (3898'). Spot 25 bbls 15% HCL-NE-FE acid in the open hole from 3890'-3800'.
- ④ Set pkr @ 3550'. Load backside w/ completion fluid.
- ⑤ Acidize w/ 75 bbls 15% HCL-NE-FE & 1020 lbs. graded rock salt mixed in 12 bbls of 10ppg brine in 3 stages. Flush to bottom w/ 5261 completion fluid.
- ⑥ Swab back as much load wtr as possible.
- ⑦ GIH w/ prod. equip & place on test. Rig down.

ACCEPTED FOR RECORD

DEC 09 1986

CARLSBAD, NEW MEXICO

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

SIGNED [Signature] TITLE Administrative Supervisor

DATE 12-3-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

DATE 12-9-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side