Form 9–331 Dec. 1973	Form Approved. Budget Bureau No. 42-R1424
IL IL CONS. CALL UNI > STATES	5. LE 020 122 (8)
FOR SAME OF THE INTERIOR FOR SAME OF A GEOLOGICAL SURVEY	LC - 030133 (B) 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME NMFU
1. oil gas well other Water Inj	South Eunice Unit
2. NAME OF OPERATOR CONOCO INC.	9. WELL NO. 26
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240	10. FIELD OR WILDCAT NAME EUNICE 7 RIVERS QUEEN
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OF
below.) AT SURFACE: 640 FSL + 1980 FEL	Sec. 22, T-225, R-36E
AT SURFACE: WGO F 3L F 1700 1 CC AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD
FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) CIRON OUT	(NOTE: Report results of multiple completion or zon change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner MIRU. Rel pkr. CO to 3843'. Set	lirectionally drilled, give subsurface locations an nt to this work.)*
WIII.9 BBLS 15 % HCL- NE-FE. Po Well on Injection. Inj 330 BL 8-18-84	ump in 475 psi. Place
Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct SIGNED TITLE ADDITIONS OF APPROVAL. IF ANY Subsurface Safety Valve: Manu. and Type TITLE TITLE TITLE TITLE	isor DATE 10 1/7/84
OCT 2 1984	

Carlsball MEN MEXICO *See Instructions on Reverse Side