

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP  
(Other instruction  
verse side)

ATE\*

Headset Bureau No. 1604-01  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-030133B

8. 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Conoco Inc.

3. ADDRESS OF OPERATOR

P.O. Box 460 - Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

660' FSL + 1980' FWL

14. PERMIT NO.

30-025-08996

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7. UNIT AGREEMENT NAME

South Eunice Unit

8. FARM OR LEASE NAME

South Eunice Unit

9. WELL NO.

27

10. FIELD AND POOL, OR WILDCAT

Eunice 7 Rivers Queen South

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

27 - 225 - 36E

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:

TEST WATER SHUT-OFF

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☐  
☐

PULL OR ALTER CASING

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☐  
☐  
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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐  
☐  
☐  
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Clean-out, Open Add'l Pay + Acidize

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 starting any  
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-  
nent to this work.)\*

1-5-89 Perf. 7R Queen @ 3699-3704', 3768-73', 3776-83' (34 shots). Plug back  
wellbore to 3760'. Acidize 7 Rivers interval w/60 Bbls 15% HCl-FE  
acid w/120 gals checkersol in 3 stages. Frac 7 Rivers as follows:  
(1) Pump 2500 gals 40 lb gel pack (2) Pump 1000 gals 40 lb gel w/1/2 pp  
20/40 sand (3) Pump 2000 gals w/1 pp sand (4) Pump 3000 gals  
w/2 pp sand (5) Pump 4000 gals w/3 pp sand. Pump 500 lbs  
graded rock salt. Swab, CO & hang well on

1-12-89 RD & MO

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

SIGNED

W.W. Baker W.W. Baker

TITLE

Administrative Supr.

DATE

Aug. 25, 1989

(This space for Federal or State office use)

APPROVED BY

(ORIG. SGD.) DAVID R. GLASS

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side