

N. M. P.
P. O. Box
HOBBS, NEW MEXICO 88240

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR
CONOCO INC.

3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2970' E5L 9-330' FEL
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:

☐
☐
☒
☐
☐
☐
☐
☐
☐

5. LEASE

LC-031740 (U)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMEU

8. FARM OR LEASE NAME

Meyer B-4

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

Eunice Monument G/SA

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

Sec. 4, T-21S, R-36E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

RECEIVED

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

CL 2 215
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

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 9-23-82. Logged intervals 3200'-3767'. Perf Upper Grayburg @ 3654', 56', 71', 76', 88', 90', 95', 97', 3718' & 3720' w/ 1 JSPP. Set CIBP @ 3735'. Displace oil w/TFW. Acidize intervals 3654'-3720' w/ 850 gals 15% HCL acid. Flush w/ 25 bbls TFW. Switch production equipment and placed on production. Tested 10-14-82: OBC, 35 BW in 24 hrs.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED R. E. Bingham TITLE Administrative Supervisor DATE 11-24-82

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY W. CHESTER

CONDITIONS OF APPROVAL JAN 17 1983

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED

JAN 19 1983

**O.C.D.
HOBBS OFFICE**