

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 well ☒ gas well ☐ other ☐2. NAME OF OPERATOR  
CONOCO INC.3. ADDRESS OF OPERATOR  
P. O. Box 460, Hobbs, N.M. 882404. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 3300' FSL & 2310' 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:

☐  
☐  
☐  
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☐  
☐  
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☐  
☐

5. LEASE

LC-031740(6)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFLL

8. FARM OR LEASE NAME

Meyer B-4

9. WELL NO.

19

10. FIELD OR WILDCAT NAME

Oil Center Blinbry

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

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

12. COUNTY OR PARISH 13. STATE

Lea

NM

14. API NO.

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

(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.)\*

CO to 5968'. Perf Upper Oil Center Blinbry at 5888', 91', 94', 96', 98', 5902', 04', 10', 14', 17', 23', 24', 29', 31', 41', 43', &amp; 5945' total 17 holes. Set pkr. at 5700'. Acidize Blinbry as follows: Pump 60 bbls. 15% HCL-NE. Flush w/ 50 bbls. 2% KCL TFW. Release pkr at 5700'. Swab. Chemically inhibit w/ 3 drums chemical in 30 bbls. TFW. GIH w/ 50 PMA, SN to 5920'. Place on production test.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Wm. A. Dutton TITLE Administrative Supervisor DATE January 29, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:USGS  
NMF44  
FILE

\*See Instructions on Reverse Side

APPROVED

FEB 2 1981

DISTRICT SUPERVISOR