

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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 ☐
well well other

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: 660' FNL & 1980' FWL
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* ☐

SUBSEQUENT REPORT OF:

(other) CHEMICAL INHIBIT ☒

5. LEASE

LC-031740 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

Meyer B-9

9. WELL NO.

4

10. FIELD OR WILDCAT NAME

Eunice Monument (G-SA)

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

Sec. 9, 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.)*

MIRU 4-6-83. Perforate Grayburg w/1 JSPF @ 3794', 47', 3808', 3810', 3821', 23', 34', 36', 44', 47', 64', 67', & 72'. TOTAL 13 SHOTS. SET pkr. @ 3570'.
Acidize w/ 50 BBL. of 15% HCL-NE-FE & 168 gal of 10 ppv brine w/250 lbs. rocksalt & 10 lbs guar gum. Flush w/ 50 BBL TFW. Rel pkr. Set RBP @ 3785'. Perf. Grayburg w/1 JSPF @ 3740', 43', 45', 46', 59', 60', 68', & 3764'-TOTAL 8 SHOTS. Set pkr. @ 3690'. Acidize w/ 24 BBL. 15% HCL-NE-FE acid. and 30 BBL. TFW. Swba. Chemical inhibit w/ 1/2 drum chemical mixed in 100 TFW. Rel pkr. Rel RBP. Run production equipment. Test.

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

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

SIGNED Greg Perry TITLE Administrative Supervisor DATE 4-28-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 09 1983

RECEIVED

SEP 12 1983

O.C.D.
HOBBS OFFICE