

COPY TO O. C. G.

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 ☒ well gas ☐ 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 8660' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
LC - 031740 a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
N.M.F.U.

8. FARM OR LEASE NAME
Meyer A-1

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
Eunice Monument G-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 18, T-21S, R-36E

12. COUNTY OR PARISH
Lea

13. STATE
N.M.

14. API NO.

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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

U. S. GEOLOGICAL SURVEY
HOBBS, 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 2-6-80. Pumped 3 bbls 15% HCl-NE down +bg. & Flushed.
Perforated @ 3812'-21', 3846'-51', 3870'-80', 3882'-88', 3890'-3901'
w/ 1 JSPF (44 holes). Set treating pkr. @ 3750'. Acidized w/ total of
94 bbls 15% HCl-NE in 2 stages. Flushed well w/ TFW.
Scale inhibited w/ 34 bbls. of chemical inhibitor. Flushed w/ 2% KCl water.
Ran 125 jts. 2 7/8" tbg, SN, & OPSMA. Tbg. set @ 3890', SN @ 3860'.
Placed well on production.

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

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

SIGNED Wm. A. Dutton TITLE Admin. Supervisor DATE 2/11/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
USGS-5
NMFU-4
FILE

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED

FEB 19 '80

OIL CONSERVATION DIV.

U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT