

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: 1980' FNL 81980' 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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RECEIVED

(NOTE: Report results of multiple completion or zone change on Form 9-330.)
JAN 10 1980U. 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 1-24-80. Tagged fill @ 3602' - Drilled out CIBP @ 3465' CO to 3736'

Spot 4 bbls. 15% HCl-NE. Perf. Eumont. @ 3527', 40', 50', 55', 62', 67', 74', 86', 93', 99', 3607', 18', 21', 30', 35', 44', 51', 54', 3660' w/ 1 JSPP (19 holes)

Set CIBP @ 3670', treating pkr. @ 3470'. Pump in 72 bbls. 15% HCl-NE. Flush & swab.

Mixed 6 drums TH-814, 3.5 gal. FCL20 in 60 bbls. 2% HCl wtr. Pump 64 bbls. of mixture down tbg. w/ 1 OEMA, 116 jts 2 7/8" tbg., 2-6' x 2 7/8" tbg. subs. Ram pump

6 rods. Placed well on production 1-28-80

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

SIGNED W. A. Butterfield TITLE Admin. Supervisor DATE 1-29-80

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:USGS-5
NMFA-1
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*See Instructions on Reverse Side