

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: 2310' FNL & 2310' FNL
AT TOP PROD. INTERVAL: ☒
AT TOTAL DEPTH: ☒

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

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) ☐

5. LEASE

LC-031740(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

Meyer A-1

9. WELL NO.

10

10. FIELD OR WILDCAT NAME

Eunice Monument GSA

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

Sec. 17 T-215 R-36E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

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 OH section to 3949' EIH w/75' of 700 grain
string-shot and shoot @ CO depth. Set pkr @ 3800'.
Acidize OH in two stages w/100 bbls 15% HCL-NE-FE.
Pump 300lbs diverting agent and flush w/35 bbls 2% KCL TFW.
Swab Chemically inhibit OH w/ one drum chemical mixed in
10 bbls 2% KCL TFW. Pump 130 bbls 2% KCL TFW and 300lbs div-
erting agent. Rel pkr. Run production equipment. TEST.

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

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

SIGNED W. A. Gillham TITLE Administrative Supervisor DATE 2-9-83

APPROVED

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) W. L. CHESTER DATE _____
CONDITIONS OF APPROVAL, IF ANY:

FEB 11 1983

FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

See Instructions on Reverse Side

RECEIVED

FEB 10 1983

OIL & GAS
MINERAL INVEST. SERVICE