

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 & 660' 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) Test casing

SUBSEQUENT REPORT OF:

☐  
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☐  
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☐  
☒

5. LEASE

LC-032099(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

Lockhart A-30

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Eumont Gate Seven Rivers Queen

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

Sec. 30, T-21S, R-36E

12. COUNTY OR PARISH

Lea

13. STATE

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.)\*

The casing was found to be in satisfactory condition; Pumped 15 bbls pkr fluid. Pressured up to 600 lbs for 15 minutes. Held OK. The subject well is currently under engineer evaluation. There is a possibility for future recompletion in the Eumont Gas zone.

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

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

SIGNED W. A. V. [Signature] TITLE Administrative Supervisor DATE 1-14-83

ACCEPTED FOR RECORD (space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS  
CONDITIONS OF APPROVAL SEP 07 1983

DATE \_\_\_\_\_

ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side