

Form 9-331
Dec. 1973

N. M. OIL CONS. COMMISSION
P. O. BOX 1080
HOBBS, NEW MEXICO 88240
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 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 & 1980' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

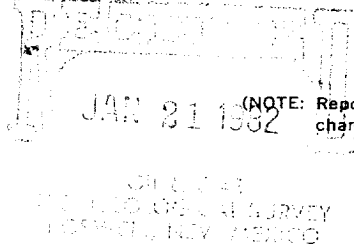
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

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(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 to 5998'. Perf w/ 1 JSF as follows: 5713', 16', 26', 28', 5928', 33', 41', 46', 49', 54', 59'. Set RBP 5915', pkr 5630'. Acidize 5713'-5890' w/ 180 bbls 15% HCL-NE-FE in 4 stages. Divert w/ rock salt and benzoic acid. Flush w/ 56 bbls 2% KCL TFW. Swab. Set RBP 5985', pkr 5900'. Pump 21 bbls 15% HCL-NE-FE. Flush w/ 53 bbls 2% KCL TFW. Reset pkr 5900'. Sand frac w/ total 520 bbls. 40* gelled fluid, 28220 # 20/40 sd and 5780 # 10/20 sd, flushed w/ 51 bbls 2% KCL TFW. Run production equipment. Test.

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

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

SIGNED Wm. A. Gillham TITLE Administrative Supervisor DATE January 20, 1982

APPROVED

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

JAN 26 1982
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side