Form 9-331 Dec. 1973

## SULT TO O. C. C.

5. LEASE

allunikalisi kanini 🦳 denosia, reperkalisi ini alisabelisi kani

Form Approved. Budget Bureau No. 42-R1424

UNITED STATES				
DEPARTMENT	OF	THE	INTERIOR	
GENLOG	ICAL	SUE	VFY	

DEPARTMENT OF THE INTERIOR	LC-031740b
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOEOGIONE SURVEI	9.15 A 188
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different	H.M.F.U.
reservoir, Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1 oil gos —	Meyer B-8
1. oil gas uell other	9. WELL NO. 35.44.43.43.43.43.43.43.43.43.43.43.43.43.
2. NAME OF OPERATOR	<b>5</b> 9945 5 888
Conoco Inc.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Eunice Monument (6-54)
P.O. 460. Hobbs N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
P.O. 460, Hobbs, N.M. 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA (BREE ) (BREE)
below.)	Sec. 8, 7-215, R-36
AT SURFACE: 190' FNL & 330' FWL	12. COUNTY OR PARISH 13: STATE
AT TOP PROD. INTERVAL:	1
AT TOTAL DEPTH:	Lea NM.
16 CULCAL ADDRODDIATE DON TO INDICATE MATURE OF NOTICE	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	<u> </u>
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
DECUEST FOR ACCROSS HE	3582
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE REPAIR WELL DE CONTROL DE C	/ IS IM) -
REPAIR WELL	Report results of multiple completion or zone
PULL OR ALTER CASING [ ]	change on Form 9-330.)
MULTIPLE COMPLETE	1 <b>79</b>
CHANGE ZONES	
(other) U. S. GEOLOGICAL	SURVEY
The state of the s	the control of the co
HOBBS, NEW MI  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state	e all portinent details, and give portinent dates."
including estimated date of starting any proposed work. If well is d	irectionally drilled, give subsurface locations and
including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	
It is proposed to co bacidize su	bject well as follows:
, .	
MIRU & kill well if necessary. Tag for for	11 L co to 3966' "Facan
The difficulty of the control of the	i i i i i i i i i i i i i i i i i i i
T. 1 ( 7027 - 2018)	1 150 Belografe-EG
necessary. Treat perfs. 3837'-3918'	A DOOD GALL TO BE HELT NE FL
	୍ୟୁର୍ବିଶ କ ଲିଲ୍ଲୁର
acid & scale inhibit. Flush & swab well.	Return well to production
·	그는 그는 그를 잃었다. 🖊 🙎 그를 일취하는 📧
l test.	
£ 1 581.	그 한 사회학 회사
	기가 가는 그 기가 가는 그 그들은 그를 들었다.
	美国商店(1000年) 医多种
	얼마일까요 그 불특성장
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
	선생이 제공 그렇게 가능하는 학생 학회
18. I hereby certify that the foregoing is true and correct	
SIGNED litru a-7 when the TITLE	DATE 10/26/70
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(This space for Federal or State of	fice use)
•	
APPROVED BY TITLE	DATE DATE
CONDITIONS OF APPROVAL, IF ANY:	(
U3G5 - 6 NMFU -4	וויעומיי
FILE	CIKAIOM

\*See Instructions on Reverse Side