

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE
ORIGINAL FORM
(Do not use a
reproducible form.)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

LC-030133B

INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Conoco Inc.		8. FARM OR LEASE NAME South Eunice Unit	
3. ADDRESS OF OPERATOR P.O. Box 460 - Hobbs, New Mexico 88240		9. WELL NO. 34	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FAL & 660' FWL - Unit Letter D SJS		10. FIELD AND POOL, OR WILDCAT Eunice 7 Rvs Queen, S	
14. PERMIT NO. 30-025-09072		15. ELEVATIONS (Show whether DF, RT, GR, etc.)	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 28-22S-36E		12. COUNTY OR PARISH Lea	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETION ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☒ CO, Open Add'l Pay Estim	
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.)

Work started 3/4/87. MRLU. Tag for fill at 3709'. Clean out iron sulfide to 3802'. Circulate clean. Spot 2 bbls 15% HCL-NE-FE acid at 3784'-3710'. Perf w/ 4 ispf at 3720'-3730' for total of 44 perms. Set pkr at 3470'. Acidize w/ 90 bbls 15% HCL-NE-FE acid in 3 equal stages. Pump 500 lbs rock salt in 7 bbls gelled brine between stages. Flush w/ 23 BTFW. Swab well. POOH. Run producing equipment and place on production. Work completed 3/27/87

ACCEPTED FOR RECORD

SJS
AUG 24 1987

CARLSBAD, NEW MEXICO

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

SIGNED *[Signature]* JF FINNEY

TITLE Administrative Supervisor

DATE August 19, 1987

(This space for internal or State office use)

APPROVAL OF
COMMISSIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See instructions on Reverse Side