

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 Water Inj

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.)  
660' FNL + 660' FEL

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) Clean Out

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.)\*

MIRU. Tag @ 3807'. CO to 3815'. Set pkr

Acidize w/ 11.9 BBLs 15% HCL-NE-FE. Flush w/ 40 bbl

9# brine. Place well on injection. Inj 340 BWPD

@ 780 psi on 8-18-84.

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

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

SIGNED Wm. A. Thutertford TITLE Administrative Supervisor DATE 10/17/84

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

APPROVED BY Steve TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL OCT 2 1984

Carlsbad NEW MEXICO

\*See Instructions on Reverse Side