

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Conoco Inc.

3. Address and Telephone No.

10 Deste Dr. Ste 100 W Midland, TX 79705 (915) 686-5494

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1650 FEL ~ 1980 FSL

Unit letter 9, Sect. 28, T22S, R36E

5. Lease Designation and Serial No.

8910115860

6. If Indian, Allottee or Tribe Name

LC 282-2-B

7. If Unit or CA, Agreement Designation

8. Well Name and No.

South Eunice Unit No. 46

9. API Well No.

30-025-09088

10. Field and Pool, or Exploratory Area

Eunice 7 Pools Queen South

11. County or Parish, State

Lea, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other CO perf ~ stimulate
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

1-10-91 MURU. CO 25' fill to TD 3806'. Perf 2 gSPF 3634-40, 45-49, 53-70. Acidized w/100 BBLS 15% HCL. Inj w/129,400 gals X-linked gel w/56,000# 16-30 sand. Swabbed. CO to TD. Put back on production. RD.

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

Signed

Christine L. Nell

Title

Admin. Assistant

Date

7-16-91

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: