NO. OF COPIES RECEIVED .		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	C-102 and C-103 Effective 1-1-65	
FILE		• • • • • • • • • • • • • • • • • • • •
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Fee.
OPERATOR		5. State Oil & Gas Lease No.
	•	
SUN (DO NOT USE THIS FORM FOR USE "APPLI		
I. OIL GAS WELL	7. Unit Agreement Name	
2. Name of Operator	8. Farm or Lease Name	
Conoco Inc.	SOUTH EUNICE UNIT	
3. Address of Operator	9. Well No.	
P. O. Box 4	64	
4. Location of Well UNIT LETTER	10. Field and Pool, or Wildcat So. EUNICE T RVRS. Q	
THE EAST LINE, SE		
	12, County LEA	
16. Chec	ck Appropriate Box To Indicate Nature of Notice, Report or Ot	her Data
		T REPORT OF
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DELLING OPHS.	THEMHODHARA DHA DUJE

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

MIRU 11/26/83. DO 3590'- 3820'. SPOTTED 3 BBLS
15% HCL-NE-FE 3500'-3700'. PERF W/2 JSPF @
3619', 39', 54', 57', 75', 86', 91', 3700', 10', 16', 30', + 3746'.

SET PKR @ 3535'. ACIDIZED PERFS W/72 BBLS
15% HCL-NE-FE. FLUSHED W/21 BBLS TFW. SWBD.

REL PKR. RAN INJECTION EQUIP. INJECTING 280
BWPD @ 1040 PSI ON 12/5/83.

18. I hereby certify the	hat the information	above is true and	d complete to the be	st of my knowledge and belie

SIGNED WHE A- HELL STATES

.....Administrative Supervisor

DATE 12/29/83

