

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SCANDY 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 ☐
well well well
2. NAME OF OPERATOR
CONOCO INC.
3. ADDRESS OF OPERATOR
P.O. Box 110, Hubert, LA 70450
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL + 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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☒

SHOOT OR ACIDIZE ☒

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) OPEN ADD'L PAY ☒

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. CO TO 4691'. SPOT 2 BBLs 7 1/2% HCL-NE-FE 4505'-4630'. PERF W/2 JSPF @ 4605', 06', 07', 08', 09', 10', 11', 12', 13', + 4614'. SET PKR @ 4525'. ACIDIZE 30 BBLs 7 1/2% HCL-NE-FE DIVERTING W/150 LBS ROCKSALT. FLUSH W/20 BBLs TFW. SWAB. REL PKR. FOAM FRAC IN 2 STAGES W/A TOTAL OF 262 BBLs 70 QUALITY FOAM, 186284 SCF NITROGEN, 8652 LBS 20/40 SAND, + 79 BBLs WATER. CO W/NITROGEN TO 4691'. RUN PROD EQUIP. TEST.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Wm A. Butterfield TITLE Assistant State Supervisor DATE 7/30/84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 9-25-84

CONDITIONS OF APPROVAL, IF ANY:

5. LEASE

LC - 069515

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NORTH EL MAR UNIT

8. FARM OR LEASE NAME

NORTH EL MAR UNIT

9. WELL NO.

25

10. FIELD OR WILDCAT NAME

EL MAR DELAWARE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC. 26, T26S, R32E

12. COUNTY OR PARISH

LEA

13. STATE

NM

14. API NO.

30-025-08290

15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)