Form 9-331 Dec. 1973

Form Approved.

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

PULL OR ALTER CASING MULTIPLE COMPLETE

CHANGE ZONES ABANDON\*

Dec. 1973	Budget Bureau No. 42-R1424
UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE LC-030/68 (a)
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELL (Do not use this form for proposals to drill or to deepen or plug back to a diff	erent N·M.F.U.
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Eaves A
1. oil gas cother well other	9. WELL NO. 3
2. NAME OF OPERATOR  CONOCO INC.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR  P. D. Bry 460 Hobbs, N.M. 88240  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  AT SURFACE: 1980 FSL & 2310 FEL  AT TOP PROD. INTERVAL:	11. SEC., T., R., M., OR BLK. AND SURVEY OR  AREA  Sec. 19, T-265, R-37E
	12. COUNTY OR PARISH 13. STATE  Lea N.M.
AT TOTAL DEPTH:  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NO	TICE,
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF TEST WATER SHUT-OFF SHOOT OR ACIDIZE SHOT OR ACID	Report results of multiple completion or zone change on Form 9-330.)
REPAIR WELL	1 19 5 change on Form 9-330.)

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

U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO (other) Convert to injection 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.)\*

It is proposed to convert subject well to injection as follows: Rig up & pull production equipment. If any fill is indicated, clean-out to T.D. (3098'). Run coated they. & tension injection packer, setting packer @ 3030'. Connect to injection like & begin injection.

Subsurface Safety Valve: Manu. and Type		Set @	<b>3 1 3 4</b>	_ Ft
18. I hereby certify that the foregoing is true and correct				
SIGNED Life a Tulbufully TITLE Admin. Supervisor D	ATE	9/13/79	4 3 3 3	
APPROVED (This space for Federal or State office use)	DATE			
CONDITIONS OF APPROVAL, IF ANY:  U.S.65. S APR 2 1980	DATE -	To the second se		
FILE ACTING DISTRICT ENGINEER *See Instructions on Reverse Side				