COPY TO O. C. C.

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 well ☑ gas well ☐ other

2. NAME OF OPERATOR
CONOCO INC.

3. ADDRESS OF OPERATOR
P. O. BOX 460, HOBBS, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 660' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
LC-030168a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
EAVES A

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
SCARBOROUGH-YATES 7RIVERS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 19, T-26S, R-37E

12. COUNTY OR PARISH
LEA

13. STATE
NM.

14. API NO.

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

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)		

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HOBBS, NEW MEXICO

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.)*

It is proposed to clean out, perf. & acidize subject well as follows: MIRU & Kill well. Clean out fill to 3185' (PBD) if necessary. Remove RBP @ 3185'. Clean out to 3201'. Treat perfs 3190'-3200 w/ 800 gal. 15% HCl-NE. Flush & swab. If scale is present, perf. @ 3132'-3179' w/ 1 JSPF. Acidize 3132'-3179' w/ 800 gal. 15% HCl-NE. Flush & swab. If lower zone non-commercial set RBP @ 3185' & return to production. If lower zone commercial, return both zones to production.

Verbal approval rec'd 6/5/80 per Jim Gillham.

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

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

SIGNED John A. Butterfield TITLE Admin. Supervisor DATE 6/5/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

4565-5
NMFU-4
FILE

*See Instructions on Reverse Side