

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Other instruction
verse side)

Form approved,
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
CONOCO INC.

3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface Unit 14
2310' FNL 990' FEL

14. PERMIT NO.
30-025-12087

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5. LEASE DESIGNATION AND SERIAL NO.
LC-030168(B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Eaves B-1

8. FARM OR LEASE NAME
Eaves B-1

9. WELL NO.
5

10. FIELD AND POOL, OR WILDCAT
WMLF / Sandrough, Yates

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 30, T-26S, R-37E

12. COUNTY OR PARISH 13. STATE

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)	☐		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☒
(Other) Open & Test Add'l Pw	☒		

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

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.)*

1. MTRU. Prepare to run CBL.
2. Ran CBL from 3257'-2433'. TOC at 2570'. Set RBP at 3168'. Reset at 3165'. Reset at 3151' & test to 1000 psi. Found small leak from 761'-822'.
3. Spot 2 bbls 15% HCL-NE-FE acid from 3152'-3029'. Pump w/ 2 jsp F bottom to top at 3150', 44', 38', 24', 16', 05', 03', 3091', 78', 70', 68', 62', 57' & 55'. Set pkl at 3026'. Acidize pkl w/ 56 bbls 15% HCL-NE-FE acid. Flush to bottom pkl w/ 19.5 bbls 9# uricene. Subd well. Clean location.

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

SIGNED DE FINEY

TITLE Administrative Supervisor

DATE 3-6-87

20. Signature for Federal or State office use:

APPROVED BY _____
COORDINATOR OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD

MAR 11 1987

*See instructions on Reverse Side

ED

RECEIVED

MAR 10 1961

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FBI
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE