

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, N.M. 88240
-
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2310' FNL & 990' 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:

- | | |
|----------------------|-------------------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input checked="" type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> |
| (other) | |

SUBSEQUENT REPORT OF:

- | | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

RECEIVED (NOTE)

SEP 22 1980

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

(NOTE: 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.)*

MIRU. Pull rods and pump. CO to 3275'. Run 3 7/8" bit w/ 4 1/2" csq scraper to 3275'. Spot 1.5 bbls. 15% HCl-NE-FE from 3100'-3193'. Perf 3175'-78', 3181'-84', 3190'-93' w/ ZJSPE. Run pckr, nipple, tbg. Set pckr @ 3100'. Load backside w/ 25 bbls TFW. Acidize w/ 1000 gals. 15% HCl-NE-FE. Divert w/ 100 gals. 10 lb. brine w/ 100 lbs rock salt in 20 lb/1000 gals. guar gum. Pump 1000 gals 15% HCl-NE-FE. Flush to perfs. w/ 20 bbls TFW. Swab back acid water. Pump chemical inhibitors into perfs @ 3-5 BPM. Flush w/ 105 bbls TFW. POOH. Run tbg w/ mud anchor and seat nipple. Run rods & pump, place on production.

Subsurface Safety Valve: Manu. and Type

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

SIGNED

Wm A. Butterfield (Th

TITLE Administrative Supervisor

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

Set @ _____ Ft.

DATE 500 9/18/80

SEP 24 1981

DATE _____
DISTRICT SUPERVISOR _____

USGS 5
NMFU #
File