

COPY TO O. & O.

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: *660' FNL & 660' FWL*
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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☒
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

RECEIVED
OCT 29 1979
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5. LEASE
NM 0321613
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
NMFU
8. FARM OR LEASE NAME
Jack B-17
9. WELL NO.
2
10. FIELD OR WILDCAT NAME
Langlie Mattix 7 Rurs On
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 17, T-24S, R-37E
12. COUNTY OR PARISH
Lea
13. STATE
N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3294' DF

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 & acidize subject well as follows:
MIRU & Kill well if necessary. CO 5 1/2" csg. to 3335'; CO 4" liner to 3653'. Spot 84 gal. 15% HCl-NE from 3646' to 3475'. Set plr. @ 3270'. Pump 6930 gal. 15% HCl-NE. Flush & sweep well. GTH w/ production equipment, setting SN @ 3450'. Test pump.*

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

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

SIGNED *John A. Butterfield* TITLE _____

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

*4565 -5
NMFU -4
FILE*

APPROVED
DATE *10/26/79*
OCT 29 1979
Cl Hall
ACTING DISTRICT ENGINEER

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OCT 20 1961

O.C.D. HOBBS, OFFICE