5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR GFOLOGICAL SURVEY

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME JICARILLA A PACHE
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME
1. oil gas other	JICARILLA 30
2. NAME OF OPERATOR	
CONOCO INC.	10. FIELD OR WILDCAT NAME WEST LINDRITH GALLUP DAKOT
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	SEC. 30, T-25N, R-4W
AT SURFACE: 1650 FNL + 1650 FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE RIO ARRIBA NM
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 7385 GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF M	(NOTE: Report desuits of multiple completion of zeries
REPAIR WELL UP	change by Form 9–330.)
MULTIPLE COMPLETE	
ABANDON*	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is different measured and true vertical depths for all markers and zones pertined	nt to this work.)*
MIRU. INSTALL BOP. CLEAN OUT TO	0 8040' W/HYDROSTATIC
BAILER. SET 51/2" CIBP@ 8030	SPOT 5 OF SAND
ON TOP OF PLUG. RUN PRODUCT	TION EQUIPMENT. SWAB
TEST.	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct SIGNED TITLE Administrative Super	NISOT DATE 6/10/83
(This space for Federal or State of	fice use)
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
(RECEIPED 1 VERBAL APPROVAL FROM STEV	E MASON 6/10/83.)

*See Instructions on Reverse Side