Form 9-331 Dec. 1973

## UNITED STATES DEPARTMENT OF THE INTERIOR

FARMINGTON

		m Approved. dget Bureau No. 42R1424
5.	LEASE CONTINICT	64

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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	Jicarilla 20
well well other	9. WELL NO.
2. NAME OF OPERATOR CONOCO INC.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	W. Lindryth Gallup Dakota
P. O. Box 460, Hobbs, N.M. 88240.  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
helow )	Sec. 19 T-25N, R-4W
AT SURFACE: 1670'FSLQ 910'FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. ATT NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO:  TEST WATER SHUT-OFF  FRACTURE TREAT  SHOOT OR ACIDIZE  SUBSEQUENT REPORT OF  198	<del>D</del>
TEST WATER SHUT-OFF	1
FRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  PULL OR ALTER CASING	32
SHOOT OR ACIDIZE  REPAIR WELL  SHOOT OR ACIDIZE  REPAIR WELL  SHOOT OR ACIDIZE  REPAIR WELL	(NQTE: Report results of multiple completion or zone
PULL OR ALTER CASING []	SURVET change on Form 9-330.)
REPAIR WELL PULL OR ALTER CASING	VI. (A.
ABANDON*	
(other) Torial Phinger Lift	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine	directionally drilled, give subsurface locations and
MIRU 9-20-82.	•
Tagged bettom @ FC27, Set RBP @	7990! Spet 7 gal of
Sand on top of RBP aldump boiler, Las	nd the e 7400' uf
5N & 7868! Rig down,	
Tested 11-7-82: 6 BC, 4BIV & 78 MCF	in 24hrs. Way 2
Subsurface Safety Valve: Manu. and Type	Set @ FI
18. I hereby certify that the foregoing is true and correct	
SIGNED WING Healthyful'S TITLE Administrative Sup	
ACCEPTED FOR RECORD ce for Federal or State o	ffice use)  DATE
conditions of approval, if any:  NOV 1 5 1982	DATE

\*See Instructions on Reverse Side