

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: 1850' FNL + 1840' 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: SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐ ☐
FRACTURE TREAT ☐ ☐
SHOOT OR ACIDIZE ☐ ☐
REPAIR WELL ☐ ☐
PULL OR ALTER CASING ☐ ☐
MULTIPLE COMPLETE ☐ ☐
CHANGE ZONES ☐ ☐
ABANDON* ☐ ☐
(other) AMEND WELL COMPLETION REPORT

5. LEASE
CONTRACT 36
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
JICARILLA APACHE
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
NORTHEAST HAYNES
9. WELL NO.
2E
10. FIELD OR WILDCAT NAME
OTERO GALLUP
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 16, T-24N, R-5W
12. COUNTY OR PARISH
RIO ARriba
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

BUREAU OF LAND MANAGEMENT
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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.)*

THE SUBJECT REPORT WAS SUBMITTED 9/7/83.
ITEM No. 17, DATE COMPLETE (READY TO PRODUCE)
SHOULD BE 5/23/83, INSTEAD OF 8/25/83.
A NEW COMPLETION REPORT WILL BE SUBMITTED
AFTER THE WELL IS COMMINGLED DOWNHOLE.

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

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

SIGNED David L. Luger TITLE Administrative Supervisor DATE 11/10/83

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NOV 16 1983

FARMINGTON RESOURCE AREA

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BY KL