	Budget Bureau No. 1004-0135 Expires August 31, 1985 TE
November 4983) Formerly 9-331) DEPARTMENT OF THE INTERIOR verse of the control	NM-2512
BUREAU OF LAND MANAGEMENT	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WEL (Do not use this form for proposals to drill or to deepen or plug back to a diff. (Do not use "APPLICATION FOR PERMIT—" for such proposals.)	
1.	7. UNIT AGRESMENT NAME
OIL GAS OTHER	8. FARM OR LEASE NAME
2. NAME OF OPERATOR CONOCO INC.	Hawk B-1
3. ADDRESS OF OPERATOR P. O. Box 460. Hobbs, N.M. 88240	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State require See also space 17 below.) At surface	Wantz Abo
660' FSL & 1980' FWL	SURVET OR AREA
600 132 41100 1112	Sec 9-215-37E
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	
16. Check Appropriate Box To Indicate Nature of I	Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
	ER SHUT-OFF REPAIRING WELL
PRACTURE TREAT MULTIPLE COMPLETE FRAC	CTURE TREATMENT ALTERING CASING ABANDONMENT®
SHOOT OR ACIDIZE	DOTING OR ACIDIZATE
REPAIR WELL	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
17. DESCRIBE PROPUSED OF COMPLETED OPERATIONS (Clearly state all pertinent details, a proposed work. If well is directionally drilled, give subsurface locations and ment to this work.)	the state of starting and
nent to this work.)	PRD A 1291/ LL + J. EAA
MIRU. Rel tog anchor @ 6371'. Set psi surface pressure. Dump 2 sx s	RBP @ 6511 FTESI TO SOO
DSI surface pressure. Dump 2 SX S	sand on RBP. Shut-in WH.
TAN	
APEROVED 1 1 1	Z F NEI REES
EMDING 2/6	5/86
Very Consider	
Line ()	tion of Satisfactory
weeks test.	U J
18. I hereby certify that the foregoing is true and correct	strative Supervisor
TITLE	DATE 2/12/85
SIGNED LANGE VIEW	
(This space for Federal or State office use)	DATE 2-15-85
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	

FEB 18 1988