

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' FSL + 2540' 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 <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <u>OPEN ADD'L PAY</u> <input checked="" type="checkbox"/>	

5. LEASE
LC-030168 (A)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
EAVES A

9. WELL NO.
15

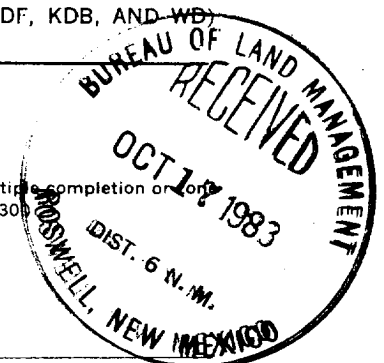
10. FIELD OR WILDCAT NAME
SCARBOROUGH YATES 7 RVRS.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 19, T-26S, R-37E

12. COUNTY OR PARISH 13. STATE
LEA NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)



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

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.)*

MIRU. CO TO 3190'. REL RBP @ 3190' + RESET @ 3204'. CIRC HOLE CLEAN. PERF W/ 1 JSPF @ 3132', 43', 47', 51', 56', 89', 91', + W/ 2 JSPF @ 3082', 3086', 3109', 12', 15', 24', 38', 76', 79' (TOTAL 25 PERFS). SET PKR @ 2980'. ACIDIZE PERFS W/ 42 BBLs 15% NE-FE-HCL. FLUSH W/ 27 BBLs 2% KCL TFW. SWAB. REL PKR. SET SUBMERSIBLE PUMP @ 3063'. TEST.

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

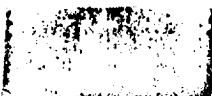
18. I hereby certify that the foregoing is true and correct

SIGNED W.A.B. [Signature] TITLE Administrative Supervisor DATE 10/14/83

APPROVED (This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS DATE _____
CONDITIONS OF APPROVAL, IF ANY:

DEC 1 1983



RECEIVED

DEC 5 1983

C.C.D.
HOBBS OFFICE