

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☒ gas ☐ other ☐
well well

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 & 1780' 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) set production csg. ☒

5. LEASE

LC - 031670 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

N.M.F.U.

8. FARM OR LEASE NAME

Warren Unit

9. WELL NO.

63

10. FIELD OR WILDCAT NAME

Tubb / Blinbry

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 20, T20S, R38E

12. COUNTY OR PARISH 13. STATE

Lea

N.M.

14. API NO.

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

3548' GR

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

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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.)*

Reach TD @ 6775', 9-29-79. Ran 7" guide shoe, 41' shoe jct., FC, 67 jcs. 7" csg., DV tool, & 97 more jcs. 7", 26", 15-55 csg.

Pipe to GL-- 6761'. DV tool @ 3979', FC @ 6728'.

1st stage cmt.: Pmpd. 640 sx. class "C" cmt. Circ. 50 sx. to surface.2nd stage cmt.: Pmpd. 1300 sx. Howco Lite-Water followed by 210 sx. class

"C" cmt. Circ. 75 sx. cmt. to surface. Rig down & release rig 10-3-79

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

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

SIGNED

Wm A. Dutterfield

TITLE Admin. Supervisor

DATE

10-3-79

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

USGS-5

N.M.F.U.-4

FILE

*See instructions on Reverse Side

