Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	CONS. COMMISSION
P.O. BO	X 1980RM APPROVED
HOBBS.	X 1980RM APPROVED NEW MEXICO - 88240 NE Expires: March 31, 1993 5. Lease Designation and Serial No.

		LC 031695B	
SUNDRY NOTICES A	6. If Indian, Allottee or Tribe Name	_	
Do not use this form for proposals to drill or to deepe	en or reentry to a different reservoir.		
Use "APPLICATION FOR PERMIT" for su	uch proposals	7. If Unit or CA, Agreement Designation	
SUBMIT IN T	RIPLICATE		
. Type of Well			
X OH Gass	8. Well Name and No.		
Well Well Other 7. Name of Operator	Warren Unit Blin/Tubb WF WELL #93		
CONOCO INC.		9. API Well No.	
3. Address and Telephone No.	30 - 025 - 27584	30 - 025 - 27584 10. Field and Pool, or Exploratory Area	
10 DESTA DR. STE 100W, MIDLAND, TX. 79705 (915) 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	Warren Blinebry Tubb O & G		
SURFACE: 660' FSL & 1980' FWL, SEC. 33, T 208, R	11. County or Parish, State		
TD:		LEA, NM	
•		DT OR OTHER DATA	
12. CHECK APPROPRIATE BOX(s) TO IND	ICATE NATURE OF NOTICE, REPO	RI, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACT	ION	
Notice of Intent	Abandonment	Change of Plans	
I HOUGE OF HERM	Recompletion	New Construction	
X Subsequent Report	Plugging Back	Non-Routne Fracturing	
	Casing Repair	Water Shut- Off	
Final Abandonment Notice	Altering Casing	Conversion to injection Dispose Water	
	X Other ACIDIZE	(Note: Report results of multiple completion on Well	
13. Describe Proposed or Completed Operations (Clearly state all pertin		Completion or Recompletion Report and Log form.)	
ACID UPPER BLINEBRY W/ 4500g 15% O POOH W/ PKR & RBP. GIH W/ BAILER CL 3-9-95 RDMO. RETURN WELL TO PRO			
TEST DATED 3-23-95: 5 BOPD, 89 BW	PD, 67 MCFPD	AC AP	
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	and a second of the second		511 (2)
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	CARLISAD NEW S		{T}
	CARLSBAD, NEW &	## 95 ### 95	{T}
	CARLSBAD, NEV		{T}
14. I herabic cartifu that the foregoing is true and correct	CARLSBAD, NEW A	# 99 ***********************************	{T}
14. Thereby certify that the foregoing is true and correct		# 9 5	{T}
B. Shall III	Bill R. Keathly	Date4-6-95	{T}
B. As a	SHI R. Keathty		{T}
Signed Title (This space for Federal or State office use)	Bill R. Keathly SR. REGULATORY SPECIALIST		{T}
Signed Title (This space for Federal or State office use)	Bill R. Keathly SR. REGULATORY SPECIALIST	Date <u>4-6-95</u>	{T}
(This space for Federal or State office use) Approved by	BHIR. Keathly SR. REGULATORY SPECIALIST	Date	[T]

*See Instruction on Reverse Side