

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: *1980' FNL 2660' FWL*
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☒
☐
☐
☐
☐
☐
☐

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HOBBS, NEW MEXICO

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

5. LEASE

NM-0321613

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

N.M.F.U.

8. FARM OR LEASE NAME

Jack B-26

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Justis Blinberry

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

Sec. 26, T-24S, R-37E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

14. API NO.

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

3211' D.F.

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 9-24. 700H w/ production equipment. Scraped out csg.
Spotted 45661. acid & flushed w/ 60 461.
Ran production equipment. Tested — produced 8 BW, 6 BW, &
38.5 SEC in 24 hours. (10-6-79)

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

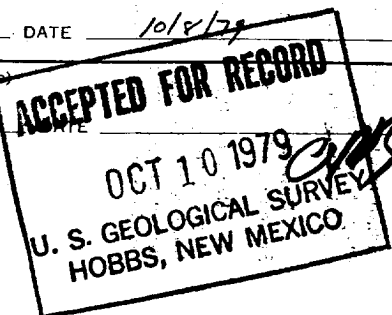
SIGNED *Chad L. Hester* TITLE *Admin. Supervisor* DATE *10/8/79*

(This space for Federal or State office use)

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

USGS-5
NMFH-4
FILE

*See Instructions on Reverse Side



10-1-67

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OCT 16 1967
O.C.D. HOBBS, OFFICE