

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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: *1980' FNL & 430' FNL*
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
LC-031695A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
SEMU

8. FARM OR LEASE NAME
SEMU Blinebry

9. WELL NO.
103

10. FIELD OR WILDCAT NAME
Blinebry

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 29, T-20S R-38E

12. COUNTY OR PARISH
Lea

13. STATE
N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3524'

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*

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(other) *set production csg.*

RECORDED

FEB 12 1980

(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.)*

Reached TD of 6150' on 2-6-80. Ran GR-CNL-FDC-GR-DLL - Caliper logs. Ran guide shoe, shoe jt, FC, DV tool, & 151 jts. 5 1/2", 17# K-55 csg. set @ 6150'. DV tool @ 2709' cmt. 1st stage w/ 733 5X. class "C" cmt. w/ additives. Circ. 150 sx. cmt. to surface. Cmt. 2nd stage w/ 1176 sx. Lite-Wate. Tail in w/ 110 sx class "C" cmt. w/ additives. Circ. 190 sx. cmt. to surface.

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

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

SIGNED *John A. Butterfield* TITLE *Admin Supervisor* DATE *2/8/80*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:
*USGS-5
NMFU-4
FILE*

11
C. W. K. M. S.

OIL CONSERVATION DIV.

FEB 19 1980

RECEIVED