UNITED STATES HOUDE, HELDEN	
DEPARTMENT OF THE INTERIOR	์ โั๊๊ - 057ฉเo (B)
GEOLOGICAL SURVEY RECEIVED	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON 29VELS3 (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.) BUR. OF LAND MGMT	7. UNIT AGREEMENT NAME MCA 8. FARM OR LEASE NAME 2
1. oil gas ROSWELL DISTRICT well other	9. WELL NO.
2. NAME OF OPERATOR	183
CONOCO INC. 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME (G-SA)
P. O. Box 460, Hobbs, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	SEC. 27, T-175, R-32E
AT SURFACE: FSL + 2615 FEL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
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) PULL CSG + RUN LINER; ACIOIZE	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and t to this work.)*
MIRU. SWAGE OUT COLLAPSED CEG.	FILL OH to 3755'
W/254 exs OYSTER SHELLS. SPOT 100	Die CAL-SEAL ON TOP OF
SHELLS. RUN 745 OF 5" 15# LIN	ER W/ TOP @ 3000!
	'C". WOC 24 HRS. PRESSU
	UT CMT, CAL- SEAL, & SHELLIOIZE GRAYBURG - SAN AND

15 PRUS 3740'- 4205' W/75 BBLS 15% HCL-NE-FE. PUMP 400 LBS
ROCKSALT MIXED IN 5 BBLS 10 PPG BRINE W/10 LBS GUAR GUM.
PUMP 75 BBLS 15% HCL-NE-FE. OVERFLUSH W/30 BBLS
2% KCL TFW. RUN PRODUCTION EQUIPMENT. TEST.

Subsurface Safety Valve: Manu. and Type			Set @	Ft.
18. I herel	by certify that the foregoing is t	rue and correct	. 1 /	
SIGNED	Chris Bode	TITLE ADM. ANALYST DATE	6/16/83	
	APPROVED	(This space for Federal or State office use)		
	BY	TITLE DATE	·	

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