Form 9-331 Dec. 1973

P. C. BOX 1980 HOBBS, NEW MEXICO 88240

Form Approved. Budget Bureau No. 42-R1424

UNITED STATES

DEDARTMENT OF THE INTERIOR	1 C = 30 mg all acres
DEPARTMENT OF THE INTERIOR	LC-028509(5) 198395
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
	MCA Unit
(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.)	8. FARM OR LEASE NAME
1. oil gas cher	9. WELL NO.
2. NAME OF OPERATOR	3. 1122 10. 377
CONOCO INC.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Maljamar 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	AREA
below.)	Sec. 22, T-175 R-32E
AT SURFACE: 1225 FSL & 2615 FEL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH:	Lea 1.17.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15 SLEVATIONS (SHOW DE KDD AND WD)
	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	4
REPAIR WELL PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
MALLITURE COMPLETE	3 (28 3
CHANGE ZONES	.' 변경 3
ABANDON*	
(other) Surface Water flows Renaus	K ; MGMT, SERVICE
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (CIEDSWELL)	
including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	firectionally drilled, give subsurface locations and nt to this work.)*
Set pkr @ 3000; load back side wy	TFW and pressure
the they-csy annulus w/scopsi. Rig o	ond pump 129 st
	, , ,
Class 'C' cmt W22 CaCl2 to 1770!	Displace emt stury
Wifreshirtr. Relpkn. Run production	n equipment, Test.
,	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby contify that the foregoing is true and correct	
18. I hereby certify that the foregoing's true and correct SIGNED WY A-TULL TITLE Administrative Supervi	1501 DATE 2-2-83
APPROVED This space for Federal or State of	£
APPROVED This space for Federal or State of W. CHESTER CONDITIONS OF APPROVAL, IF ANY:	tice use)
APPROVED BYTITLETOUR CONDITIONS OF APPROVAL, IF ANY:	DAIL

3 1983

FOR

JAMES A. GILLHAM See Instructions on Reverse Side DISTRICT SUPERVISOR