Form 9-331 Dec. 1973

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE. CHANGE ZONES ABANDON* (other)

REPAIR WELL

Form Approved.

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

Budget Bureau No. 42-R1424 UNITED STATES 5. LEASE LC 031696/a) DEPARTMENT OF THE INTERIOR 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SURVEY 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS SEMU (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 SEMY BLINEBRY gas weil 9. WELL NO. other 82 2. NAME OF OPERATOR .161, 28 **1980** 10. FIELD OR WILDCAT NAME CONOCO INC. 3. ADDRESS OF OPERATOR BLINEBRY U.S. GEOLOGICAL SURVEY 11. SEC., T., R., M., OR BLK. AND SURVEY OR P. O. Box 460, Hobbs, N.M. 8 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 SEC. 25 T-205 R · 37E 12. COUNTY OR PARISH 13. STATE AT SURFACE: 1980 FSL & 990 FEL AT TOP PROD. INTERVAL: LEA 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)

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.)*

It is proposed to refrac. the Blinebry perts in subject well as follows: MIRU & Frac. Blinebry perts @ 5755'- 6006' W/ 2400 gel. 15% HeI-NE-FE WI ball sealers., followed by 60,000 gel.
gelled fluid & 108,000# 20/40 sand. Record pressure, flow well back, & place on test.

SUBSEQUENT REPORT OF:

Subsurface Safety Valve: Manu. and Type	Set @	Ft.
18. I hereby certify that the foregoing is true and correct SIGNED THE Administrative Supervisor	DATE 7/25/80	,
(This space for Federal or State office use)	7 WINOVED	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY: 4565-5 MAFY -4 FILE	DISTRICT SUPERVISOR	
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