N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

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: 660' FSL & 1830' FEL
AT TOP PROD. INTERVAL: ✓
AT TOTAL DEPTH: ✓

5. LEASE
LC-031670 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
SEMU McKEE

9. WELL NO.
71

10. FIELD OR WILDCAT NAME
WARREN McKEE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 18, T-20S, R-38E

12. COUNTY OR PARISH
LEA

13. STATE
NM

14. API NO.

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

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*	☐	☐
(other)		

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

BUREAU OF LAND MANAGEMENT
RECEIVED
AUG 15 1983
DIST. 6 N. M.
ROSWELL, 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.)*

MIRU. DO CIBP @ 7520'. Log. Spot 14 bbls 15% HCL-NE-FE 7420'-7770'. Perf Lower Abo w/2 JSPF (Note: exact number & depth of perfs will be based on log). Acidize perfs w/60 bbls 15% acid. Flush. Swab. Spot 6 bbls 15% acid 7250'-7390'. Perf Middle Abo w/2 JSPF. Acidize perfs w/80 bbls 15% acid. Flush. Swab. Spot 10 bbls 15% acid 6990'-7230. Perf Upper Abo w/2 JSPF. Acidize perfs w/ 80 bbls 15% acid. Flush. Swab. Test. If Abo is not productive, squeeze perfs. Spot 2 bbls 15% acid 6897'-6936'. Perf Lower Drinkard w/1 JSPF 6867'-6936'. Acidize perfs w/60 bbls 15% acid. Flush w/49 bbls TFW. Swab. (See attached page)

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

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

SIGNED W. A. Rutledge TITLE Administrative Supervisor DATE 8/12/83

APPROVED

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 26 1983

*See Instructions on Reverse Side

SEMU McKee #71
Recompletion

Spot 8 bbls 15% acid 6657'-6844'. Perf Upper Drinkard w/ 1 JSPF 6657'-6844'. Acidize perfs w/ 33 bbls 15% acid. Flush w/ 52 bbls TFW. Swab. Run production equipment. Test.