

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 ☒ Injection
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: 990' FSL & 2310' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) csq. leak survey

SUBSEQUENT REPORT OF:

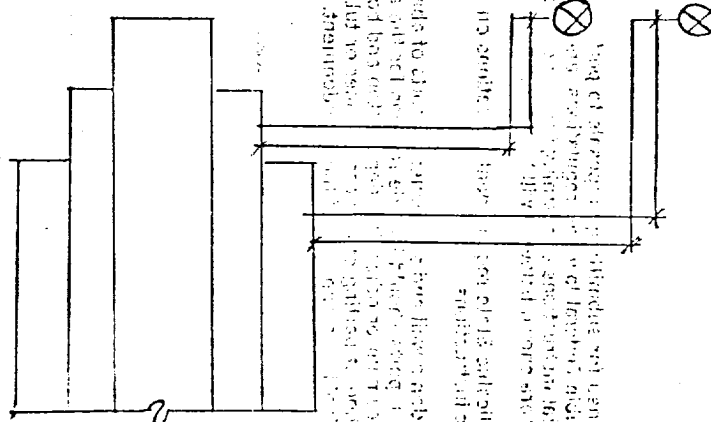
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5. LEASE
LC 03169576
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
NMFL
8. FARM OR LEASE NAME
Warren Unit McKee
9. WELL NO.
25
10. FIELD OR WILDCAT NAME
Warren McKee
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 29, T-20S, R-38E
12. COUNTY OR PARISH Lea 13. STATE NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

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

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.)*

csq. leak survey was performed on subject well on 8-27-80, w/ valves being dug up & tagged at surface. Survey witnessed by Tony Plattsmier of NMOCED.



Subsurface Safety Valve: Manu. and Type _____

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

SIGNED W. A. Plattsmier TITLE Admin. Supervisor DATE 9/16/80

APPROVED BY Dr. Chester TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 18 1980

U.S. GEOLOGICAL SURVEY