

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 ☐ gas ☐ other Wtr injection
well well
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: 1980' FWL & 660' FWL
AT TOP PROD. INTERVAL: ✓
AT TOTAL DEPTH: ✓
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) Convert to water injection ✓

5. LEASE
LC-063458
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
NMFU
8. FARM OR LEASE NAME
Warren Unit
9. WELL NO.
20
10. FIELD OR WILDCAT NAME
Blinebry
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 34 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.)*

MIRU 1-7-83. POOH w/ 2³/₈ tbg. Set pkr @ 5646'.
Load annulus w/ 170 bbls pkr fluid. Acidize Blinebry
perfs w/ 7560 gals 15% HCL-NE-FE and 420 gals 10#
brine w/ 250 # rock salt & 10# guar gum & 1890 gals TFW.
Install injection head. Rel. Rig. Pending connection.

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

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

SIGNED W. A. Butterfield TITLE Administrative Supervisor DATE 1-12-83

ACCEPTED FOR RECORD _____
(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS DATE _____
CONDITIONS OF APPROVAL SEP 07 1983

ROSWELL, NEW MEXICO

*See Instructions on Reverse Side