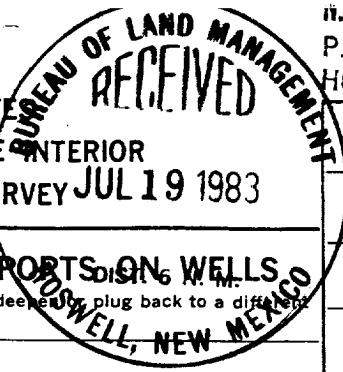


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY



N. M. OIL GURS. COMMISSION
P. O. BOX 198C
HOBBS, NEW MEXICO 88240
Form Approved.
Budget Bureau No. 42-R1424

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: 990' FNL + 1700' 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	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input checked="" type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE
LC-031620 (B)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
SKAGGS B

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
GLORIETA / BLINEBRY / DRINKARD

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 12, T-20S, R-37E

12. COUNTY OR PARISH
LEA

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDE, 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. SET RBP@6950'. SET PKR@6750'. ACIDIZE 6777'-6940' W/64 BBLs 15% HCL-NE-FE. FLUSH W/42 BBLs TFW. SWAB. REL PKR + RESET RBP@6760'. SPOT 2 BBLs ACID FROM 6682'-6734'. PERF W/1 JSPPF @ 6682'-6734' (TOTAL 14 HOLES). SET PKR @ 6600'. ACIDIZE 6682'-6734' W/42 BBLs 15% HCL-NE-FE. FLUSH W/41 BBLs TFW. ACID FRAC W/A TOTAL OF 196 BBLs 15% HCL-NE-FE, 114 BBLs GELLED FLUID, + 107 BBLs GELLED FLUSH. SWAB. RESET RBP@5950' + PKR @ 5700'. ACIDIZE 5805'-5880' W/52 BBLs 15% HCL-NE-FE. DIVERT W/2 BBLs GELLED 10 PPG BRINE W/40 LBS/1000 GALS GUAR GUM, 1 PPG ROCK SALT, + 1/2 PPG BENZOIC ACID FLAKES. FLUSH W/36 BBLs TFW. (ATTACHMENT)

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

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

SIGNED Peter W. Chester TITLE Administrative Supervisor DATE 7/15/83

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY: AUG 22 1983

RECEIVED

AUG 28 1983

O.C.D.
HDBBS OFFICE

SKAGGS B No. 5
OPEN ADDITIONAL PAY AND ACID FRAC

SWAB. REL PKR. RESET RBP @ 5400'. SPOT 2
BBLs 15% HCL-NE-FE FROM 5279' TO 5332'.
PERF W/1 JSPF @ 5315'-5332 (TOTAL 18 HOLES).
SET PKR @ 5200'. ACIDIZE 5315'-5332'
W/96 BBLs 15% HCL-NE-FE. DIVERT W/2
BBLs GELLED 10 PPG BRINE W/40 LBS/1000
GALS GUAR GUM, 1 PPG ROCK SALT, + 1/2 PPG
BENZOIC ACID FLAKES. FLUSH W/32 BBLs TFW.
SWAB. REL PKR + RBP. RUN PRODUCTION
EQUIPMENT. TEST.

RECEIVED

AUG 23 1983

**O.C.D.
HOBBS OFFICE**