Form 3160-5	. 151177	ED STATES	PO. BOX 1980	
(June 1990)		OF THE INTERIOR	Budget Bureau No. 1004-0135 Expires: March 31, 1993	
		ND MANAGEMENT	5. Lease Designation and Serial No.	
_	LC 031670B			
Do not use this form	n for proposals to drill	ND REPORTS ON WELLS or to deepen or reentry to a differer PERMIT—" for such proposals	6. If Indian, Allonee or Tribe Name	
	7. If Unit or CA, Agreement Designation Warren Unit Blin/Tubb WF			
1. Type of Well V Oil Cas			8. Well Name and No. Well #36	
2. Name of Operator	Warren Un Blin/Tubb WF			
Conoco, Inc.	9. API Well No.			
3. Address and Telephone No	30 025 25152			
		land, TX 79705 (915) 686-5	424 10. Field and Pool, or Exploratory Area Warren Blinebry Tubb 0&G	
4. Location of Well (Footage, S	11. County or Parish, State			
660 FNL and 660 FWL, Sec 27, T-20-S, R-38-E			Lea County, NM	
<u> </u>				
12. CHECK AP	PROPRIATE BOX(s)		CE, REPORT, OR OTHER DATA	
TYPE OF SUI	BMISSION	TYPE	OF ACTION	
Notice of Int	ent	Abandonment	Change of Plans	
Subsequent R		Recompletion     Plugging Back	New Construction	
Y Subsequent M	leport	Casing Repair	Water Shut-Off	
Final Abando	onment Notice	Attering Casing	Conversion to Injection	
		<b>X</b> outer add perfs &	treat Dispose Water (Note: Report results of multiple completion on Well	
			Completion or Recompletion Report and Log form )	
<ol> <li>Describe Proposed or Complet give subsurface locations</li> </ol>	ted Operations (Clearly state all pe and measured and true vertical of	rtinent details, and give pertinent dates, including estima lepths for all markers and zones pertinent to this work	ted date of starting any proposed work. If well is directionally drilled,	
Add Tub 7-24-95: Perf -	b perforations a 6518 to 6685'./	and treat as follows: Acidize w/3000 gals 15% NE		
7-31-95: Perf -		Acidize w/ 2500 gals 15% N	EFE, frac w/49,900 gals &	
8-3-95: Perf -	ŧ 16/30 sand. 5882 - 6036'. ↓ )00# 16/30 sand.	Acidize w/3500 gals 15% NE	FE, frac w/58,000 gals &	
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			SEP ART	
		in the second	nandaru nita	
		- I <b>7</b>	1995 15 VIII	
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$\wedge$	10)			
	1/1/1-	Ann E. Ritchie		
14. I hereby certify thei the total	the second and the second	Regulatory Agent	9-7-95	
Signed	ming	Tite	Date	
(This space for Federal or Su	nie office use)		• •	
Approved by Title Title			Date	
			ncy of the United States any false, fictitious or fraudulent statements	

\*See Instruction on Reverse Side

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