

**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: 1780/5 1780/10
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) ☐

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5. LEASE

NM0557686

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

SEMU

8. FARM OR LEASE NAME

SEMU Drinkard Tubbs

9. WELL NO.

97

10. FIELD OR WILDCAT NAME

WGR Drinkard

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC 23 T20S R37E

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

14. API NO.

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

3552' GR

(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.)*

1-20-79. MURU
set 5 1/2" cement set @ 7656'
pmpd 1475x Cress Cement
disp to 7561'
spot 23' plug on top of retainer.
perf 6619, 29, 53, 63, 66, 74, 82, 86
40, 48, 6702, 6777, 81, 6832, 36
w/ 13SPF
acidize perts w/ 4400 gals 15% HCl acid.

Change of Lease Name

Subsurface Safety Valve: Mapd. and Type

Set @ _____ Ft.

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

SIGNED

*Wm. A. Butterfield*TITLE Admin Supv.DATE 8-29-79

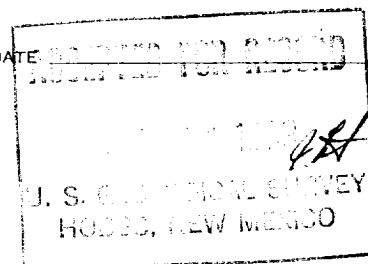
(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:



NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION FORM

Form C-102
Supersedes C-128
Effective 1-4-65

All distances must be from the outer boundaries of the Section.

Operator <u>Conoco Inc.</u>			Lease <u>Semu Denmark Tubb</u>		Well No. <u>97</u>
Unit Letter <u>K</u>	Section <u>23</u>	Township <u>20</u>	Range <u>37</u>	County <u>LEA</u>	

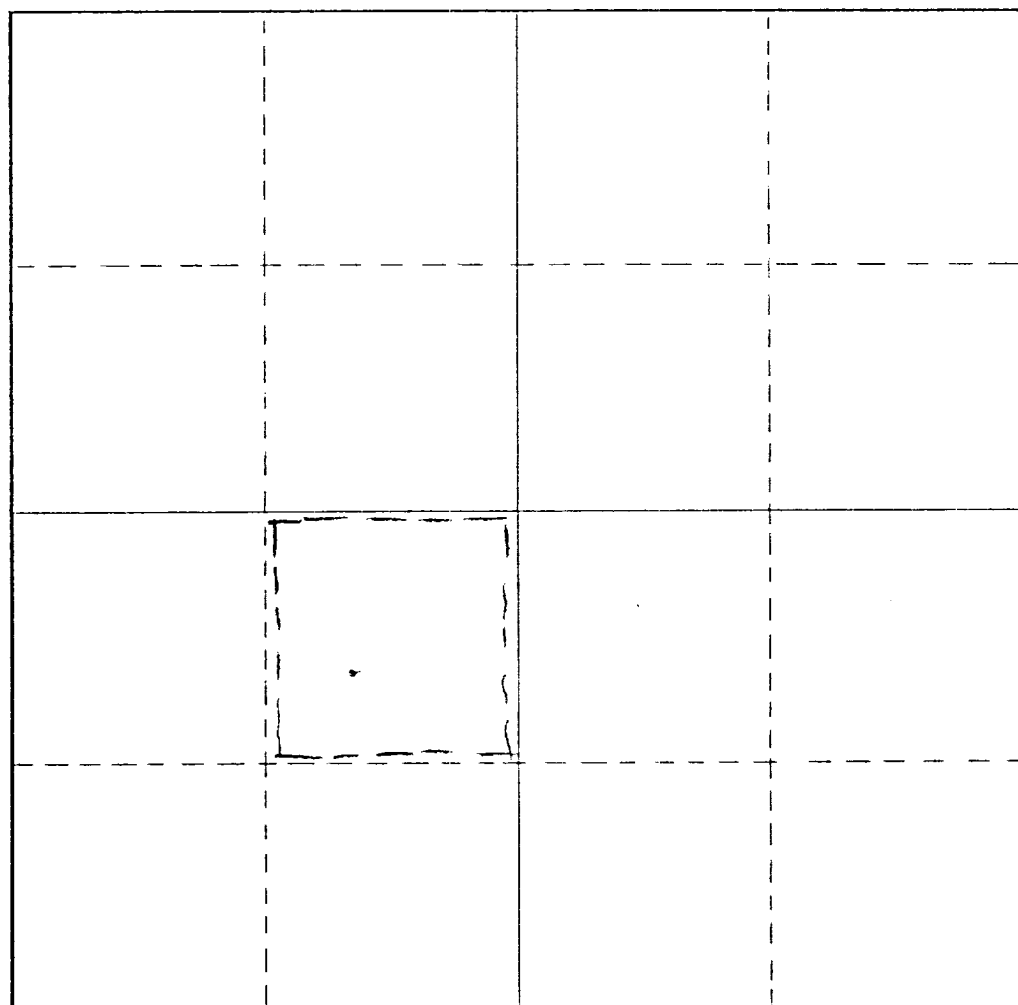
Actual Location of Well: <u>1780</u> feet from the <u>South</u> line and <u>1780</u> feet from the <u>West</u> line					
Ground Level Elev. <u>3552</u>	Producing Formation <u>Wen. Denmark</u>		Pool <u>Wen. Denmark</u>	Dedicated Acreage: <u>40</u> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Wm A. Butterfield
Position
Administrative Supervisor
Company
Conoco Inc.
Date
8-24-76

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed _____

Registered Professional Engineer and/or Land Surveyor _____

Certificate No. _____

