RODELPS	UNI) STAT	INTERIOR VERSE ELC	6.	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 LEASE DESIGNATION IND SERIAL NO. LC-031670(B) IF INDIAN, ALLOTTES OR TRIBE NAME
(Do not use this for	RY NOTICES AND RE	PORTS ON WELL pen or plug back to a differ "for such proposals.)	.5 ent reservoir.	UNIT AGEBEMENT NAME
				NMFU
2. NAME OF OFERATOR CONOCO INC.				Warren Unit
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240				WELL NO.
 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.⁹ See also space 17 below.) At surface 				L'ELER POOL OF WEREAT R-4961
	NL & 660'FEL			Sec. 27-205-38E
14. PERMIT NO.	15. ELEVATIONS (S	how whether DF, RT, GR, etc.)	1	2. COUNTY OR PARISH 13. STATE
16.	Check Appropriate Box T	o Indicate Nature of N	otice, Report, or Oth	er Data x eepost of:
TEST WATER SHUT-OF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	COMPLETED OPERATIONS (Clearly st	rate all pertinent details, an subsurface locations and me	(Nors: Report results of Completion or Recompleti d give pertinent dates, in assured and true vertical	ERFAIRING WELL ALTERING CASING ABANDONMENT [®] multiple completion on Well on Beport and Log form.) cluding estimated date of starting any depths for all markers and sones perti- OS'. Scale inhibit OBW É B MCF on
SIGNED The	All a	TITLE	Supervisor	<u>DATE</u>
Title 13 U.S.C. BEA		See Instructions on Rev r any person knowingly a tatements or representati		any department or agency of the within its jurisdiction.

