Form 9-331 Dec. 1973

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

	_		orm Approved udget Bureau	i. No. 42–R1424
	5.	LEASE		
	6.	LC 031670 IF INDIAN, ALLOT		BE NAME
	7.	UNIT AGREEMEN	T NAME	
ıt		S BMU FARM OR LEASE N		
	9.	SEMU BLIN WELL NO.	EBRY	·
	10.	IOS FIELD OR WILDCA	T NAME	
7	11.	TUBB / BL SEC., T., R., M., O AREA	INEBRY R BLK. AND	SURVEY OF
	12.	SEC. 20, 2 COUNTY OR PARIS	105,38 SH 13. ST	<u>E</u> ATE
_	14.	API NO.	N)	1

	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME SEMU
1. oil gas well other	8. FARM OR LEASE NAME SEMU BLINEBRY
2. NAME OF OPERATOR	9. WELL NO.
Conoco Inc	108
3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME
70 Box 460 Hobbs NM 88240	TUBB / BLINEBRY
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.)	SEC. 20, 205, 38E
AT SURFACE: 1980/S 330/W AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH:	LEA NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	
	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3539'
TEST WATER SHUT-OFF FRACTURE TREAT	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE -
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
MULTIPLE COMPLETE	4
ABANDON*	
(other) set prod. csg X	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent	to this work.)*
drld 834" hole to 6750' TD 7-20-79.	
Ran 158its 7", 26# csg. DV tool @ 2994"	en e
cmtd w/1050 sx circ 85sx to surf (Clas	ss Comt)
conto 2 nd stage w/ 1740 sx literate circ 43	11 1 0 4 4070
	U. S. GEOLOGICAL SURVEY
rigdu rel rig.	HOBBS, NEW MEXICO
Subsurface Safety Valve: Manu. and Type	Set @ Ft
18. I hereby certify that the foregoing is true and correct	
7/17/	
The Tipenia. Dar	
APPROVED BY	Lu. EUB BECOKO /
APPROVED BYTITLETITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	0 1 1979
usas s	JUL 24 1979

NMFU 4

FILE

*See Instructions on Reverse OBBS, NEW MEXICO