Form 9-331 Dec. 1973

AGUINA DISTRICT FOR THE

Form Approved.

Budget Bureau No. 42-R1424

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY		2-0316	
GEOLOGICAL SURVEY	O. IF INDIA	III, ALLUITEI	E OR TRIBE NAM
SUNDRY NOTICES AND REPORTS ON WELLS		REEMENT N	IAME
(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 FOR FOR FOR FOR		R LEASE NAM	ИE
1. oil		EMU B	
well well other III	9. WELL N	0.	
2. NAME OF OPERATOR U 9 1980 CONOCO INC.	10. FIELD 0	R WILDCAT N	NAME
		bry/Drin	·····-
3. ADDRESS OF OPERATOR U. S. GEOLOGICAL SURVEY P. O. Box 460, Hobbs, N.M. 88249BBS, NEW MEXICO	11. SEC., T. AREA	, R., M., OR E	BLK. AND SURV
4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17	_	19. T-20	S.R-38E
AT SURFACE: 2615 FSL 2615 FEL	12. COUNTY		
AT TOP PROD. INTERVAL: ' AT TOTAL DEPTH:	Le		NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.		
REPORT, OR OTHER DATA	15. ELEVAT	IONS (SHOW	DF, KDB, AND
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:		(=::==	,, ,
TEST WATER SHUT-OFF    TEST WATER SHUT-OFF			
FRACTURE TREAT			
SHOOT OR ACIDIZE	(NOTE: Pana	ort regulte of	ultiple completion
PULL OR ALTER CASING [		ge on Form 9-	
MULTIPLE COMPLETE			
ABANDON*			
(other) Extend approval			
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 we request the approval Period be ex	rectionally dril t to this work.)	lled, give sub *	surface location
11 . 1. 1. 1. 1. 15 1000			
the expiration date of November 15, 1980	•		
	_	c.4-	<b>.</b>
Verbal approval received December 8,1980	per Geo	orge sie	Dafe.
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			31, 3.
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		- , , , , , ,	
Subsurface Safety Valve: Manu. and Type		5 Set	@ <u></u>
•		\$ Set	@
18. I hereby certify that the foregoing is true and correct		5 Set	@
•	DI DATE	Set Decem	@
18. I hereby certify that the foregoing is true and correct		Set Decem	@ <u> </u>
18. I hereby certify that the foregoing is true and correct  SIGNED THE Administrative Supervisor  (This space for Federal or State office  APPROVED BY		Set Decem	@
18. I hereby certify that the foregoing is true and correct  SIGNED LANGE Administrative Supervisor  (This space for Federal or State office)	ee use)	Set	@ ber 8,1980
18. I hereby certify that the foregoing is true and correct  SIGNED W. G M. TITLE Administrative Supervisor  (This space for Federal or State office  APPROVED BY	ee use)	Set Decem	@ ber 8,1980

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