Form 9-331

Form Approved.

Budget Bureau No. 42-8142

Dec. 1973	Budget Bureau No. 42-R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	LC 03/670A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different	SEMU
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas other	SEMU Permina Durge
well well other	9. WELL NO.
2. NAME OF OPERATOR	/07
Conoco Inc.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Skaggs Grayburg
P.O. Box 460, Hobbs, N.M. 88240	1. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA
AT SURFACE: 26/5' FSL & 26/5'FEL	Sec. 19, T-205 R-38E 12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Lea N.M.
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15 FLEVATIONS (CHOW DE KOR AND WED)
	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9–330.)
MULTIPLE COMPLETE	
CHANGE ZONES	
ABANDON*	
(other) change name	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	irectionally drilled, give subsurface locations and
We request approval to change the to SEMU Burger #107. The	name of subject well
to SEMU BURGER #107. The	well was originally
O Company of the Comp	
Aerm 187771 Termian	
1 m (co) 721 Tel a	
Jan Jan Jan Mi Riman	
	U.S. CECLOĞ CALLOURYEY, 🦮
	HOSOS, NÉW NEXIGO - ÇÇ 📖
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
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18. I hereby certify that the foregoing is true and correct	
SIGNED LA Q. Dattaliell TITLE Admin. Superv.	SOT DATE 1-24-80
(This space for Federal or State off	
200000	
APPROVED BY TITLE	DATE
USES-5	
FLE	
*See Instructions on Reverse S	Side
- I GINEER	