Form 9–331
Dec. 1973

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42–R1424

5. LEASE LC-031670 (b)

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 NMFU

8. FARM OR LEASE NAME SEMU McKee

1. oil well ☐   gas well ☐   (other) wtr. injection well

9. WELL NO. 114

2. NAME OF OPERATOR
CONOCO INC.

10. FIELD OR WILDCAT NAME Warren McKee

3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 88240

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 29, T-20S, R-38E

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 810' FNL & 2130' FWL
AT TOP PROD. INTERVAL: ⌐
AT TOTAL DEPTH: ⌐

12. COUNTY OR PARISH Lea   **13. STATE** NM

14. API NO.

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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

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) _____

(NOTE: Report results of multiple completion or zone change on Form 9–330.)

RECEIVED
APR 8 1983
OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and 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.)*

MIRU 2-18-83. Rel. pkr. @ 8808'. CO to PBTD, 9044'. Set pkr @ 8730'
Sand frac McKee intervals 9810'–9010' w/ 595 bbls. crosslink gel
fluid pad and 56112# 10/20 sand. Rel. pkr. CO frac sand from
8865'-9044'. Set pkr. @ 8806'. Return to injection 4-5-83 @
rate of 398 BWPD w/ 1000 psi.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _Wm. A. Rutherford_   TITLE Administrative Supervisor   DATE 4-6-83

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
JUL 7 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO