Form Approved. Form 9-331 Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE LC-031621 (b) DEPARTMENT OF THE INTERIOR 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SURVEY 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS NMFU (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.) $\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left(\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left(\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}$ 8. FARM OR LEASE NAME Britt B gas 9 other 9. WELL NO. well well 2. NAME OF OPERATOR CONOCO INC. 10. FIELD OR WILDCAT NAME NUBline bry / Drinkard 3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240 11. SEC., T., R., M., OR BLK. AND SURVEY OR **AREA** 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 SPac. 15, T-205, R-37E 12. DOUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: See 2 19804. API NO. AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

U. S. GEOLOGICAL SURVEY (SHOW DF, KDB, AND WD)

HOBBS, NEW MEXICO SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) testuew zone 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give 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.)* We propose to complete the Abo zone and test it to see if oil can be produced in commercial quantities. Set @ Subsurface Safety Valve: Manu. and Type ___ 18. I hereby certify that the foregoing is true and correct - TITLE Sr. Analyst _ DATE _ SIGNED (This space for Federal or State office use) APPROVED BY SEL PETER W. CHESTER ACTING DISTRICT ENGINEER

CONDITIONS OF APPROVAL, IF ANY:
USGS 5
NAFU 4
File