UNITED STATES

5.	LEASE		-	4		÷	ž	
	LC-	03	16	70(6)	,	Ξ.	

DEPARTMENT OF THE INTERIOR	LC-031670(b)			
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
SHADDA MULICES WAD DEDUBTE ON MELLS	7. UNIT AGREEMENT NAME			
SUNDRY NOTICES AND REPORTS ON WELLS	SEMU			
(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.)	8. FARM OR LEASE NAME			
1 oil gas	- [
1. oil gas well other other	9. WELL NO.			
2. NAME OF OPERATOR BECEIVED	5. WELL NO.			
CONOCO INC.	10 FIELD OD WILLDOWN			
	10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88243 MAR 2 0 1981	Blinebry / Tubb			
4 LOCATION OF WELL (SEPORT LOCATION OF THE CO.	11. SEC., T., R., M., OR BEK. AND SURVEY OR AREA			
4. LOCATION OF WELL (REPORT LOCATION GLEARLY See Space 17	ARCA			
AT JOB BROD INTERVAL & 990' FWL HOBBS, NEW MEXICO	Jec, 20, 1-205, K-38E			
AT TOP PROD. INTERVAL:	12. COUNTY OF PARISH 13. STATE			
AT TOTAL DEPTH:	Lea NM			
IS CHECK APPROPRIATE BOY TO INDICATE MATURE OF MOTION	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:				
FEST WATER SHUT-OFF				
TRACTORE TREAT				
SHOOT OR AC!DIZE				
PULL OR ALTER CASING \(\begin{array}{cccccccccccccccccccccccccccccccccccc	(NOTE: Report results of multiple completion or zone change on Form 9–330.)			
MULTIPLE COMPLETE	change on Form 9-330.)			
CHANGE ZONES				
ABANDON*				
other) ran surface csq.				
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 pertinent MIRU Spudwell 3/13/81. Ran 13 3/8", at 1368. Cmfd w/ 950 sx Class C cm	irectionally dr lled, give subsurface locations and it to this work.)* , 54.5 #, J-55, STC csg sef			
	•			
Subsurface Safety Valve: Manu. and Type	Sat @			
	set @ Ft.			
8. I hereby certify that the foregoing is true and correct				
IGNED A E Brigham ATLE Administrative Super	visor DATE March 19,1981			
is space for Federal or State offi	ce use)			
PPROVED BOORIS Sgd.) PETER W. CHESTER LE	DATE			
CONDITIONS OF APPROVAL, IF ANY:	DATE			

MAR 23 1981

JAMES A. CILIHAMSee Instructions on Reverse Side DISTRICT SUPERVISOR