

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

P. O. BOX 1980
HOBBS, NEW MEXICO 88240

LEASE

NM-2512

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

HAWK B-3

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

HARE SIMPSON

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC. 3, T-21S, R-37E

12. COUNTY OR PARISH

LEA

13. STATE

NM

14. API NO.

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

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.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR

CONOCO INC.

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2970' FSL + 510' FEL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

☐
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☐
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☐
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☒

(other) OPEN ADD'L PAY

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

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.)*

MIRU 7/27/83. CO TO 8005'. PERF W/ 4 JSPF @ 7960', 61', 62', 63', 64', 65', 66', + 67' (TOTAL 32 PERFS). SET PKR @ 7900'. ACIDIZED PERFS W/ 16 BBLs 15% HCL-NE-FE. FLUSHED W/ 35 BBLs TFW. REL PKR. SET RBP @ 7660' + PKR @ 7645'. PERF W/ 2 JSPF @ 7499', 7518', 33', 55', 70', 79', 93', 7609', 13', 22', 30', 33', 37', + 7641' (TOTAL 28 PERFS). SET PKR @ 7355'. ACIDIZED PERFS W/ 28 BBLs 15% HCL-NE-FE. FLUSHED W/ 35 BBLs TFW. SWBD. REL PKR + RBP. RAN PROD. EQUIP. PUMPED 4 BO, 0 BW, + 21 MCF IN 24 HRS 8/31/83.

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

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

SIGNED W. A. Butterfield Administrative Supervisor DATE 9/27/83

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

SEP 28 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO

RECEIVED
SEP 30 1983
O.C.D.
HOBBS OFFICE