N. M. GIL COMS. COMMISSION

Form Approved. Budget Bureau No. 42-R1424

| UNITED | CTATEC |
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| UNITED | SIMICS |

P. O. BOX 1980 POBBS, NEW MEXICO 832/0

| DEPARTMENT | OF  | THE | INTERIOR |
|------------|-----|-----|----------|
| GEOLOGI    | CAL | SUE | VFY      |

| DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY   | LC-032096 (B)  6. IF INDIAN, ALLOTTEE OR TRIBE NAME  7. UNIT AGREEMENT NAME NMFU  8. FARM OR LEASE NAME LOCKHART B-11  9. WELL ND. 17  10. FIELD OR WILDCAT NAME DRINKARD ABO  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 11, T-215, R-37E |  |
|---|---|--|
| 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 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   |   |  |
| AT SURFACE: 1980 FNL + 1980 FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,   | 12. COUNTY OR PARISH 13. STATE NM 14. API NO.   |  |
| REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF  | (NOTE: Report results of multiple completion or zone michange on Form 9–330.)  (NOTE: Report results of multiple completion or zone michange on Form 9–330.)  |  |
| ABO 6790'-7412' W/90 BBLS 15 W/500 LBS ROCKSALT. SET RE 6500'. ACIDIZED DRINKARD 65 1570 HCL-NE-FE. DIVERT W/ RESET RBP@7420'4 PKR@ I DRUM CHEMICAL IN 10 BBLS ROCKSALT & FLUSH W/210 BBLS + PKR@6500'. INHIBIT DRINKARD W/250 LBS ROCKSALT & FLUSH W/ EQUIP. PUMPED 5 BO, 14 BW, & 105 | te all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and int to this work.)*  AD + PKR @ G750'. ACIDIZED  BYO HCL-NE-FE. DIVERT  BP @ G765' + PKR @  BR2'- 6708' 54 8816                              |  |
|   |   |  |
| 18 I hereby certify that the foregoing is true and correct  | , ,   |  |

Administrative Supervisor DATE

(This space for Federal or State office use)

TITLE

ACCEPTED FOR RECORD

\_ DATE \_

AUG 1 9 1983

\*See Instructions on Reverse Side