

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. FORM APPROVED
Budget Bureau No. 1004-0135
P.O. Box 1980 Expires March 31, 1993
Hobbs, NM 88241 Lease Designation and Serial No.
NM 90161

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> INJECTION Other	6. If Indian, Allottee or Tribe Name
2. Name of Operator CONOCO, INC.	7. If Unit or CA, Agreement Designation
3. Address and Telephone no. 10 Desta Dr., Suite 100W, Midland, Texas 79705-4500, 915 686-5424 915 684-6381	8. Name of lease & well Hawk B-I Well #8
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Surface: 660' FSL & 1980' FEL TD: Sec 9, T2S, R37E, Unit Ltr O	9. apt well # 30 025 09906
	10. Field and Pool, or Exploratory Area Blinbry Oil & Gas
	11. County or Parish, State Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> pull tubing/pump	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

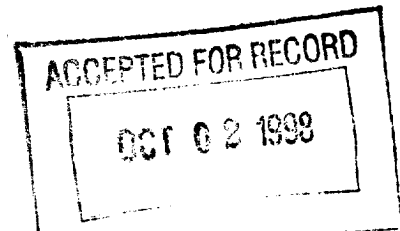
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

7-24-98: MIRU, unseat pump, hot-oiled rods & tubing, POOH w/rods & pump, SION.

7-27-98: POOH w/rods, pumped was parted, put BOP, POOH w/tubing, SION.

7-28-98: Tested in hole w/SV in place, tubing held, fished SU, set TAC, flanged well, RIH w/ pump & rods, hung well on, loaded tubing, checked pump action. SION.

7-29-98: Well on production, cleaned location, rigged down.
Pulled 6695' 2 7/8" tubing, ran back in hole - 6664' 2 7/8" tubing.



(ORIG. SGD.) GARY GOURLEY

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

Signed

Title

Ann E. Ritchie
REGULATORY AGENT

Date 9-25-98

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date