Form 9-331
Dec. 1973

COPY TO O. S. G.

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

RECEIVED
APR 22 1981
U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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: 1980' FNL & 1980' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
LC-031741(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMCU

8. FARM OR LEASE NAME
Hawk A

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
Drinkard

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 8, T-21S, R-37E

12. COUNTY OR PARISH
Lea

13. STATE
NM

14. API NO.

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

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐		☐
FRACTURE TREAT	☐		☐
SHOOT OR ACIDIZE	☑		☐
REPAIR WELL	☐		☐
PULL OR ALTER CASING	☐		☐
MULTIPLE COMPLETE	☐		☐
CHANGE ZONES	☐		☐
ABANDON*	☐		☐
(other)			

(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.)*

CO to 6775'. Run GR-PDC log from 6775' to 5000'. Perforate Upper Drinkard at 6575', 77', 86', 87', 99', 6604', 10', 11', 15' and 6618' w/ 1 JSPF. Set RBP at 6750', pkr at 6650'. Acidize Lower Drinkard (6678'-6724') w/ 21 bbls. 15% HCL-NE-FE. Pmp 65 bbls. 2% KCL TFW. Reset RBP at 6650', pkr 6400'. Acidize Upper Drinkard w/ 30 bbls 15% HCL-NE-FE. Pmp 60 bbls. 2% KCL TFW. Acidfrac Upper Drinkard as follows: Pmp 29 bbls. 40# gelled fluid, Pmp 117 bbls 28% HCL-NE-FE, Pmp 70 bbls 40# gelled fluid, Pmp 56 bbls 2% KCL TFW. Set RBP 6750', pkr 6500'. Swab. Run production equipment. Test

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

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

SIGNED Wm A. Butterfield TITLE Administrative Supervisor DATE April 20, 1981

(This space for Federal or State office use)

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

APPROVED
APR 23 1981
JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side