Form Approved. Form 9-331 Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR NM 2512 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SURVEY 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS NMFU (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 HAWKB-/ well other well 9. WELL NO. 2. NAME OF OPERATOR CONOCO INC. 10. FIELD OR WILDCAT NAME 3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 88240 DRINKARD 11. SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 SEC. 8 T-2/5 R-37E

12. COUNTY OR PARISH 13. STATE AT SURFACE: 660'FSL & 1980'FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 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: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES U. S. GEOLOGICAL SURVEY ABANDON* HOBBS, NEW MEXICO (other) · 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.)* We request approval to dually complete subject well in the Drinkard & Blinebry zones.

Subsurface Safety Valve: Manu. and Type		Set @	Ft.	
18. I hereby certify that the foregoing	is true and correct Administrative Supervisor TITLE	_ DATE	7/7/80	- · · · · · · · · · · · · · · · · · · ·
—	(This space for Federal or State office use	;)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE		

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