

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-031741 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐ K. M. OIL CONS. COMMISSION

2. NAME OF OPERATOR CONOCO INC. P. O. BOX 1980
HOBBS, NEW MEXICO 88240

3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

990' FNL & 660' FEL

7. UNIT AGREEMENT NAME

NMFU

8. FARM OR LEASE NAME

Hawk A

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Blinebry Oil & Gas/Drinkard

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

Sec 8-215-37E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH 13. STATE

Lea

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) 1

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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. Set RBP @ 6775' & pkr @ 6300'. Acidize Drinkard perfs w/90.5 bbls 15% HCL-NE-FE acid w/1500 scf per bbl N₂. Flush w/10,000 scf N₂. Swab. Chemically inhibit Drinkard. Reset RBP @ 6000' & pkr @ 5600'. Acidize Blinebry perfs w/90 bbls 15% HCL-NE-FE w/1500 scf per bbl N₂. Flush w/12,000 scf N₂. Swab. Chemically inhibit Blinebry. Rel pkr & RBP. Ran producing equipment. Pmpd 20 BO, 74 BW & 255 MCF on 4/23/85.

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

SIGNED

Administrative Supervisor

TITLE

DATE

5/10/85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY

TITLE

DATE

MAY 14 1985

*See Instructions on Reverse Side

RECEIVED

MAY 20 1985

O.C.D.
HOBBS OFFICE