N. M. OIL CONSERVATION COMMISSION
P. O. BOX 1980, HOBBS, NEW MEXICO 88240

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE
NM-079540
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Conoco Federal Tract
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Blinebry/Abo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30, T-20S, R-39E
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

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 well [X] 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: 660'FSL & 660'FWL
AT TOP PROD. INTERVAL: —
AT TOTAL DEPTH: —

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*	[X]		[ ]
(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.)*

We will P&A as follows: set 150' plug across top of Abo at 7117', 150' plug across top of Tubb at 6592', 150' plug across top of Glorietta at 5560', 100' plug across top of Queen at 3700', 100' plug across base of salt at 2740', 100' plug across 8 5/8" shoe at 1675', surface plug consisting of 15sx. Clean location. Set P&A marker. Verbal approval per Roger Chapman 11/2/81.

*All depths approximate
**Plugs will be set across any zone that was DST'd.

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

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

SIGNED W. A. Buttram TITLE Administrative Supervisor DATE November 5, 1981

(This space for Federal or State office use)

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

APPROVED
(Orig. Sgd.) ROGER A. CHAPMAN
NOV 17 1981
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side

Form 9-331
Dec. 1973

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.)

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: 660'FSL & 660'FWL
AT TOP PROD. INTERVAL: —
AT TOTAL DEPTH: —

5. LEASE
NM-079540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Conoco Federal Tract

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Blinebry / Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30, T-20S, R-39E

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) spud, ran surface csg.			

(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.)*

MIRU. Spud on 9/27/81. Ran 8 5/8" 24#, K-55, STC csg set at 1675'. Cmtd w/600sx Class C, tail w/200sx Class C. Circulated 176sx to surface.

RECEIVED
OCT 6 1981
OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

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

SIGNED Rose Ann Rosenfield TITLE Administrative Supervisor DATE October 2, 1981

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
OCT 7 1981
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

Form 9-331
Dec. 1973

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.)

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: 660'FSL&660'FWL
   AT TOP PROD. INTERVAL: —
   AT TOTAL DEPTH: —
5. LEASE: NM-079540
6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
7. UNIT AGREEMENT NAME:
8. FARM OR LEASE NAME: Conoco Federal Tract
9. WELL NO.: 1
10. FIELD OR WILDCAT NAME: Blinebry/Abo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 30, T-20S, R-39E
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)			

RECEIVED
OCT 2 1981
OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

(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.)*

This well was originally planned as a dual completion. However, we now plan on a downhole commingled single well. The casing design has been changed to the following:

Surface pipe - 8 5/8", 24#, K-55, STC set at 1680' CIRCULATE

Production pipe - 5 1/2", 17#, K-55&N-80, LTC set at 7850'

Cement will be circulated to the surface on both strings.

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

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

SIGNED Wm A. Buttram TITLE Administrative Supervisor DATE September 30, 1981

APPROVED

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) ROGER A. CHAPMAN TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 5 1981

JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side