AT TOTAL DEPTH:

Form Approved. Budget Bureau No. 42-R1424

UNITED STATES

HOBBS, NEW MEXICOEAGROAD

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| DEPARTMENT | OF | THE | INTERIOR | , | |
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| GEOLOG | | | | | |

| 6. | IF INDIAN, | ALLOTTEE | OR | TRIBE | NAME |
|----|------------|----------|----|-------|------|
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| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.) | 7. UNIT AGREEMENT NAME |
|---|--|
| | 8. FARM OR LEASE NAME LOCKHART B-13A |
| 1. oil gas other | 9. WELL NO. |
| 2. NAME OF OPERATOR | 10 |
| CONOCO INC. 3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240 | 10. FIELD OR WILDCAT NAME WANTZ AGO DRINKARD 11. SEC., T., R., M., OR BLK. AND SURVEY OR |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: GGO FNL + 1980 FEL AT TOP PROD. INTERVAL: | SEC. 24, T-215, R-37E 12. COUNTY OR PARISH 13. STATE |

7 E LEA NM14. 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: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) SET PRODUCTION CSG | (NOTE: Report results of multiple change on Form 9–330.) |
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17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent 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.)*

DRILLED TO TD 7807 ON 12/2/83. RAN 47 JTS 7" 26# L-80 csc + 128 sts 7" 26# K-55 CSG W/ DV @ 4522! CMT 15 STAGE W/350 SXS CLASS "H" + TAILED W/ 875 SXS CLASS "H". CIRC CMT 2ND STAGE W/1500 SXS CLASS "C" + 100 sxs "C". Circ 180 sxs. W Subsurface Safety Valve: Manu. and Type __ ___ Set @ _____ Ft.

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| 18. I hereby certify that the foregoing is true and correct | | | , , | | |
| SIGNED TWW TITLE Administrative Supervisor | DATE | 12 | /12/ | 83 | |
| | | | | | |
| ACCEPTED FOR SLOVENIS space for Federal or State office use) | | | | | |

APPROVED BY CORIG. SGD. DAVID R. GLASS

__ DATE __

CONDITIONS OF APPROVALE IF ANY 1983