Form 9-331 Dec. 1973

## N. M. OIL COMP COMMISSION P. O. BOX 10

HOBBS NEW MEDICO 88240

## DEPARTMENT OF THE INTERIOR

Form Approved. Budget Bureau No. 42-R1424

5. LEASE		/ \
rc.	030167	(A)

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5.	1F	INDIAN.	ALLO:	TTEF OR	TRIRE	NAM	F

GEOLOGICAL SURVEY	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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME NMFU
1. oil gas well other	8. FARM OR LEASE NAME  MCCALLISTER A  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	SCARBORDUGH YATES 7 RVRS.  11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	SEC. 25, T265, R36E
AT SURFACE: GGO FNL + 330' FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.
	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) OPEN ADDL PAY	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is deasured and true vertical depths for all markers and zones pertiner	lirectionally drilled, give subsurface locations and nt to this work.)*
MIRU 1/11/84. CO to 3268'	
15% HCL-NE-FE. PERF W/2 J	
3107, 11, 24, 48, 71, 89, 92, 3205	
61, 64, 85, 95, 3212, 14, 29, 40, 4	
2950'. ACIDIZED W/50 BBLS 1	
W/15 BBLS TFW. REL PKR.	SWBD. SET PKR @ 3007.
RAN PROD EQUIP. PAPO 3 BO, 56P	3W, 4 MCF IN 24 HRS 2/24
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct  SIGNED Win Q - Valley TITLE Administrative Super	rvisor DATE 4/5/84
ACCEPTED FOR RECORDING Space for Federal or State of	fice use)
CONDITIONS OF APPROVAL IF A 1984	