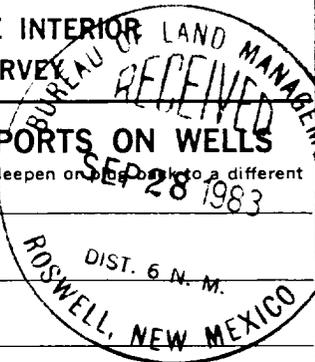


N. M. PUBLIC UTILITIES COMMISSION
P. O. BOX 1530
HOBBBS, N.M. 88240

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 on 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: 1980' FNL + 330' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE NO.
LC-030167 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
MCALLISTER A

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
SCARBOROUGH YATES 7 RIVERS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 25, T-26S, R-36E

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	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

(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 8/26/83. PERF @ 3157', 3200', 02', 04', w/ 2 JSPF + 3218', 24', 29', 40', 44', 48', 51', 61', + 3264' w/ 1 JSPF (TOTAL 17 PERFS). SET PKR @ 3060'. ACIDIZED PERFS W/ 1950 GALS OF 15% HCL-NE-FE. FLUSHED W/ 32 BBLs 2% KCL TFW. INHIBITED W/ 1 DRUM CHEMICAL MIXED W/ 10 BBLs 2% KCL TFW. FLUSHED W/ 160 BBLs TFW. REL PKR. RAN PROD. EQUIP. PUMPED 11 BO, 86 BW, + 22 MCF IN 24 HRS 9/6/83.

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

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

SIGNED W.P. Dutton TITLE Administrative Supervisor DATE 9/27/83

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

AUG 30 1983