UNITED STATES

DEPARTMENT OF THE INTERIOR	LC - 032581 (B)
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 8. FARM OR LEASE NAME
1. oil gas well other	SHOVES 13-13
2. NAME OF OPERATOR	4
CONOCO INC. 3. ADDRESS OF OPERATOR	JALMAT YATES T RURS. QN
P. O. Box 460, Hobbs, N.M. 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.) AT SURFACE: 330 FNL 4 2310 FWL	SEC. 13, T255, R36E
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
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) DRILL OUT * PERF	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	irectionally drilled, give subsurface locations and
HCL-NE-FE 2780'-3030'. PER 50, 53, 57, 80, 86, 90, 3004, 10, 2760'. ACIDIZE W/ 58 BBLS FLUSH W/ 23 BBLS TFW.	4 3018! SET PKR Q' 1570 HCL-NE-FE. SWAB. REL PKR.
RUN PRODUCTION EQUIPMENT.	, ED('

Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is, true and correct SIGNED THE Administrative Supervisor DATE 5	/21/84
APPROVED BY Description Title P.Er DATE CONDITIONS OF APPROVAL, IF ANY:	184