Form Approved. Budget Bureau No. 42-R1424

## UNITED STATES, NEW MEXICO 88240

## DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

LEASE			
NM-	032	16	13

6	IF INDIAN	ALLOTTEE	TOIDE N	A & A E

SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME				
(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.)	8. FARM OR LEASE NAME				
1. oil gas	JACK B-26				
well well other	9. WELL NO.				
2. NAME OF OPERATOR					
CONOCO INC.  3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME JUSTIS BLINEBRY				
P. O. Box 460, Hobbs, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR				
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA				
AT SURFACE: 660 FNL + 1980 FWL	SEC. 26, T-245, R-37E				
AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE				
AT TOTAL DEPTH:	14. 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: SUBSEQUENT REPORT OF:	2E 5				
TEST WATER SHUT-OFF	RE 2				
FRACTURE TREAT  SHOOT OR ACIDIZE  F					
REPAIR WELL	(NOTE: Report results of multiple completion of zone in				
PULL OR ALTER CASING	change on Form 9–330.)				
MULTIPLE COMPLETE	70 T				
ABANDON* (other) OPEN APP'L PAY	44 83				
(other) DIPEN AIDDE 1 A					
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state	e 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. CO TO TO (5758'). PERF W/2 JSPF					
•					
@ 5404, 5438, 5466, 5533, 5584, 5594, 5598, 4					
5693'(TOTAL 16 PERFS). SET PKR @ 5120'. ACIDIZE					
W/4500 GALS 15% NE-FE-HCL + 135 GALS					
CHECKER SOL. FLUSH W/36 BBLS 270 KCL TFW					
SWAB. REL PKR. RUN PROF	DUCTION EQUIP. TEST				
Subsurface Safety Valve: Manu. and Type	Set @ Ft.				
18. I hereby certify that the foregoing is true and correct					
SIGNED JVW 9 - Full Floring Administrative Supervisor DATE 9/1/83					

(Ong. Sgd.) PETER W. CHESTER APPROVED BY CONDITIONS OF APPROVAL, IF ANY: SEP 2 0 1983