4.77年9月

@

FILE - 1

| Form 9–331 Dec. 1973 | Form Approved. Budget Bureau No. 42–R1424 |
|---|---|
| UNITED STATES | 5. LEASE |
| DEPARTMENT OF THE INTERIOR | LC- 0324/3 |
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 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.) | N.M.F.U. |
| 1 all | 8. FARM OR LEASE NAME Jack B-17 |
| 1. oil | 9. WELL NO. |
| 2. NAME OF OPERATOR | 6 |
| Conoco Inc. | 10. FIELD OR WILDCAT NAME |
| 3. ADDRESS OF OPERATOR | Langlie Mattix Penrose |
| P. D. Box 460, Hobbs, N.M. 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 | 11. SEG, T., R., M., OR BLK. AND SURVEY OF |
| below.) | Sec. 17, 7-245, R-376 |
| AT SURFACE: /980'FNL & /980'FWL AT TOP PROD. INTERVAL: | 12. COUNTY OR PARISH 13. STATE |
| AT TOTAL DEPTH: | Lea N.M. |
| 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: | 5280 GR |
| TEST WATER SHUT-OFF | 학생 설립 이 병원 등급이 된다. |
| FRACTURE TREAT SHOOT OR ACIDIZE BERAIR WELL SHOOT OR ACIDIZE | |
| SHOOT OR ACIDIZE | |
| | (NOTE: Report Sults of multiple completion or zone P 1 2 1979 (Sults of multiple completion or zone |
| MULTIPLE COMPLETE | r 16 13/3 |
| ABANDON* U. S. GEO | DLOGICAL SURVEY |
| (other) set production csq. HOBBS | S, NEW MEXICO |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state | te all pertinent details, and give pertinent dates |
| including estimated date of starting any proposed work. If well is omeasured and true vertical depths for all markers and zones pertine | directionally drilled, give subsurface locations and nt to this work.)* |
| WIH w/ 96 jts. 51/2", 15.5", K-55, 5 | TEC 159. Css. Set at |
| , | र्वे विक्रिक्ष स्टिक्ट |
| 810' W/ DV tool @ 2700'. 1st stage: Pumpe. | d 216 sks. Class "C" cont |
| additives. 2nd stage: Pumped 320 sks. D | owell lite tailed w/ 100 sks. |
| ess. "C" cmt. w/ additives. Toce700'. | |
| | 6 |
| 9:00 p.m., 9-8-79. | |
| | |
| | |
| Subsurface Safety Valve: Manu. and Type | Set @Ft. |
| 18. I hereby certify that the foregoing is true and correct | |
| SIGNED Was J. Dutterfield TITLE Admin. Supervis | 9/1/4 |
| | |
| (This space for Federal or State of | ACCEPTED FOR RECORD |
| APPROVED BY TITLE TITLE | ALULI BATE |
| us65-5 | SEP 12 1979 0 |
| NMFU - 4 | OGICAL SURVEY |

O.C.D. HOBBS, OFFICE