**UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT** 

FORM APPROVED

Budget Bureau No. 1904-0135

	_ 54	JH 600	MAI OT	31,	1963	
5.	L0290	Des	gnation	and	Serial	No.

Oil X Gas Well Other  2. Name of Operator  CONOCO INC.  3. Address and Telaphone No.  10 DESTA DR. STE 100W, MIDLAND, TX. 79705 (915) 686-5400  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  SURFACE 870' FNL & 1580' FWL, SEC. 26, T 29N, R 09W, UNIT LTR 'C'  TD:  B. Well Name and No. HARDIE WELL # 1  9. API Well No.  30-045-20135  10. Field and Pool, or Exploratory Area  BASIN DAKOTA  11. County or Parish, State  SAN JUAN, NM	SUNDRY NOTICES A  Do not use this form for proposals to drill or to deep	SF 078416 6. If Indian, Alioitse or Tribe Name		
Type of Wall			7. If Unit or CA, Agreement Designation	
E. Name of Opening CONCO INC.  S. Address and Talephone No.  10 DESTA DR. STE 100M MICLAD, TX. 79705 (915) 888–5400  SURFACE 870° FAL & 1580° FWL, SEC. 25, 7 29N, R 06W, UNIT LTR 10°  SURFACE 870° FAL & 1580° FWL, SEC. 25, 7 29N, R 06W, UNIT LTR 10°  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Abbardoment   Change of Pane   New Construction   New Construction	1. Type of Well		<del></del> [	
2. Name of Operators CONCOINC 3. Address and Telephone No. 10 DESTA DRI. STE 1000W, MIDLAND, TX. 79705 (915) 886-5400  10. CRISTA DRI. STE 1000W, MIDLAND, TX. 79705 (915) 886-5400  10. First Address and Telephone No. 10. CRISTA DRI. STE 1000W, MIDLAND, TX. 79705 (915) 886-5400  10. First Address and Telephone No. 11. CRISTA DRI. STE 1000W, MIDLAND, TX. 79705 (915) 886-5400  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 11. TYPE OF SUBMISSION 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 12. Describe Mission of Institute No. 13. Describe Mission No. 14. Describe Mission of Institute No. 15. Describe Mission of Institute No. 16. Describe Mission of Institute No. 17. Describe Mission of Institute No. 18. Describe Mission of				
A North State of Telephone No.  10 DESTA DRI. STE 100W, MIDLAND, TX. 79705 (915) 686 - 5400  SURFACE 970' FNL & 1580' FWL, SEC. 26, T.29N, R.08W, UNIT LTR 'C'  10. Field and Prox. o. Exploratory Avan 9ASIN DAKOTA  SURFACE 970' FNL & 1580' FWL, SEC. 26, T.29N, R.08W, UNIT LTR 'C'  11. Center of Windows State of Telephone No.  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION TYPE OF ACTION  Notes of Insert    Notes of Insert   Abandonment Notes   Recompletion	2. Name of Operator		HARDIE	
10 DESTA DR, STE 100W, MCLAND, TX. 79705 (915) 886-5400  10 Control WM (Foodge, Sec., T. R. M. of Survey Description)  SURFACE 970* FN. & 1500 FW., SEC. 26, T. 29N, R. 08W, UNIT LTR 'C'  TD:  12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Notice of Intent  Notice of Intent  Subsequent Report  Propriet Back  Non-Router Faculting  Water Shu-Of  Ceating Repair  Other Completed Operations (Charty state all permitted despits for all markers and zones permitted to this word; 2"  11 -1 -95 MIRU. KILL WELL W/3 30 bbl 2% KCL. POOH W/1 1/4* TBG. BIH W/3 5/8* BLADE &  11 -8 -95 RDMO. RETURN WELL TO PRODUCTION  TEST DATE 11 -10 -95: 1200 MCF  TP: 110, CP: 610  Signed Water Shu and correct		9. API Well No.  30 045 20135  10. Field and Pool, or Exploratory Area  BASIN DAKOTA		
SUBFACE 870 FM. & 1560 FWL. SEC. 26, T 29N, R 06W, UNIT LTR 'C'  11. County or Prints, State  22. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION    Notice of Intent				
SURFACE 870 FM. & 1580 FML, SEC. 28, T 29N, R 09W, UNIT LTR 'C'  112. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION    Notice of Intent	4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			
TYPE OF SUBMISSION  TYPE OF ACTION    Notice of Intent				
TYPE OF SUBMISSION    Notice of Intern     Abandonment     Charge of Pane     New Construction     New Constructio		-	SAN JUAN, NM	
Notice of Infant	12. CHECK APPROPRIATE BOX(s) TO IND	ICATE NATURE OF NOTICE, REP	ORT, OR OTHER DATA	
Recompletion   New Construction   New Constructio	TYPE OF SUBMISSION	TYPE OF AC	TION	
Subsequent Report   Plugging Back   Non-Routine Fracturing	Notice of Intent	Abendonment	Change of Plans	
Cealing Repair   Water Shut-Off   Conversion to Injection   Altering Casing   Conversion to Injection   Chearty state all parties of chearty state and state of chearty and state of chearting any proposed work. If well is detectionally diffied, give subsurface locations and measured and true vertical depits for all markers and zones partient to this work.)*  11 -1 -95 MIRU. KILL WELL W/ 30 bbl 2% KCL. POOH W/ 1 1/4* TBG. BIH W/ 3 5/8* BLADE & 4 1/2* CSG SCAPPER TO 7415*, POOH. GIH W/ 2 3/8* TBG SET @ 7444*.  11 -8 -95 RDMO. RETURN WELL TO PRODUCTION  TEST DATE 11 -10 -95: 1200 MCF  TP: 110, CP: 610    Cealing Repair   Depose Value   Depose of the chearty state and correct	▼ 0.4	1 = '	=	
Final Abandonment Notice   Altering Ceasing   Conversion to Injection   X Other   Dispose Water	Subsequent report		= '	
CHG TBG SIZE  Quot. Report retails of middles sempletes as well Completed Operations (Clearly state all perfinent deals, and give perlinent dates, including estimated date of stating any proposed work. If well is decided give subsurface locations and measured and true vertical depicts for all markets and zones perfinent to this work. If well is 11-1-95 MIRU. KILL W(30 bbl 2% KCL. POOH W/ 1 1/4' TBG. BIH W/ 3 5/8' BLADE & 4 1/2' CSG SCRAPER TO 7415', POOH. GIH W/ 2 3/8' TBG SET @ 7444'.  11-8-95 RDMO. RETURN WELL TO PRODUCTION  TEST DATE 11-10-95: 1200 MCF  TP: 110, CP: 610  DEC 1 8 1995  OLL COLL DATE  4. Thereby certify that the foregoing is true and correct  Signed.  BBI R. Kea thiry SR. REGULATORY SPECIUST  Date 12-6-95	Final Abandonment Notice	= ' '		
2. Describe Proposed or Completed Operations (Clearly state all perfinent details, and give perinent dates, including settimated date of statings any proposed work. If well is detectionally diffied, give subsurface locations and measured and rule vertical depths for all markets and zones perfinent to this work; "  11 -1 -95 MIRU. KILL WELL W/ 30 bbl 2% KCL. POOH W/ 1 1/4' TBG. BIH W/ 3 5/8' BLADE & 4 1/2' CSG SCRAPER TO 7415', POOH. GIH W/ 2 3/8' TBG SET @ 7444'.  11 -8 -95 RDMO. RETURN WELL TO PRODUCTION  TEST DATE 11 -10 -95: 1200 MCF TP: 110, CP: 610  DEC 1 8 1995  OILL COTAL DIAL  4. Ihereby certify that the foregoing is true and correct  Signed.  BBII R. Kea thly SR. REGULATORY SPECIUST  Date 12-6-95	_	X Other		
Secretibe 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 substances locations and measured and true vertical depths for all markers and zones pertinent to this work.)*  11 -1 -95 MIRU. KILL WELL W/ 30 bbl 2% KCL. POOH W/ 1 1/4* TBG. BIH W/ 3 5/8* BLADE & 4 1/2* CSG SCRAPER TO 7415*, POOH. GIH W/ 2 3/8* TBG SET @ 7444*.  11 -8 -95 RDMO. RETURN WELL TO PRODUCTION  TEST DATE 11 -10 -95: 1200 MCF  TP: 110, CP: 610    DEC		CHG TBG SIZE		
TP: 110, CP: 610  DEC 1 8 1995  DEC 1 8 1995  OIL GOIL DIAZ  DISTE 3  4. I hereby certify that the foregoing is true and correct  Signed Address of Federal or State office use)  Bill R. Keethly SR. REGULATORY SPECILIST  Date 12-6-95	11 -8-95 RDMO. RETURN WELL TO PRO	•		
DEC 1 8 1995  OIL CORD DIV.  DIST. 3  4. I hereby certify that the foregoing is true and correct  Signer State office use)  Bill R. Keethly SR. REGULATORY SPECILIST  Date 12-6-95				
4. Thereby certify that the foregoing is true and correct  Signed  Signed  Title  SR. REGULATORY SPECILIST  Date  12-6-95				
Signed Title Bill R. Keethly SR. REGULATORY SPECILIST Date 12-6-95  (This space for Federal or State office use)		NEGE	1895 D E E	
(This space for Federal or State office use)		DEC 1 8	1. DIV. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
Approved by Conditions of approval, if any:	4. I hereby certify that the foregoing is true and correct	DEC 1 8  OIL COR  DIST	1695 D E E E E E E E E E E E E E E E E E E	
	Spread Time	DEC 1 8  OIL COR  DIST	1695 D E E E E E E E E E E E E E E E E E E	

\*See Instruction on Reverse Side

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