

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. LC-029509(A)
2. NAME OF OPERATOR Conoco Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 460 - Hobbs, New Mexico 88240	7. UNIT AGREEMENT NAME MCA
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit E 1330' FNL & 1280' FWL	8. FARM OR LEASE NAME MCA Unit
14. PERMIT NO. 30-025-29959	9. WELL NO. 373
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	10. FIELD AND POOL, OR WILDCAT Malsamar G/SA
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-175-32E
	12. COUNTY OR PARISH Lea
	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>set prod. csq</u> <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Ran 102 jts of 7", 26#, K-55 prod. csq and set @ 4350'
Cemented w/1900 sxs class "C" and Class "H" and circ. 467 sxs
to surface. WOC.

ACCEPTED FOR RECORD
OCT 6 1987
SJS
CARLSBAD, NEW MEXICO

RECEIVED
OCT 2 11 11 AM '87
CARLSBAD OFFICE
AREA SUPERVISORS

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

SIGNED: [Signature] TITLE: Administrative Supervisor DATE: 9-30-87

APPROVED: _____ TITLE: _____ DATE: _____

COMMENTS OF APPROVAL, IF ANY: _____

*See instructions on Reverse Side