

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI
(Other instructions
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME <i>North El Mar Unit</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>	8. FARM OR LEASE NAME <i>North El Mar</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460, Hobbs NM 88240</i>	9. WELL NO. <i>40</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>Unit C</i> <i>660' FNL & 1650' FWH of Section 31, T-26S, R-33E</i>	10. FIELD AND POOL, OR WILDCAT <i>El Mar / Delaware</i>
14. PERMIT NO. <i>30-025-08439</i>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec 31, T-26S, R-33E</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>NM</i>

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
(Other) <i>Temporary Abandon</i>	

(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.)

Start work on 1/10/87. Set CIBP at 4640'. Test CIBP at 640 psi. Circ w/ 30-000 pps fluid. Rig down. Complete work on 1/10/87.

APPROVED FOR 12-MONTH PERIOD
ENDING *3/11/88*



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

SIGNED *Administrative Supervisor* OF FINNEY

TITLE *Administrative Supervisor*

DATE *3-6-87*

This space for General or State office use

APPROVAL OF
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

MAR 11 1987

*See instructions on Reverse Side

CARLSBAD, NEW MEXICO

19. The U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

31M-Carlsbad 11-0-87

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

PRIVACY ACT

The Privacy Act of 1974 and the Regulation in 43 CFR 2.18(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 40 U.S.C. 184 (a), (b), (c), (d), (e), (f), (g), (h), (i), (j), (k), (l), (m), (n), (o), (p), (q), (r), (s), (t), (u), (v), (w), (x), (y), (z); 43 CFR 3160.

PRINCIPAL PURPOSE: The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

ROUTINE USES: (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations. (2) Request and grant approval to perform those actions covered by 43 CFR 3160.3-2(2). (3) Analyze future applications to drill or modify operations in light of data obtained and methods used. (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

EFFECT OF NOT PROVIDING INFORMATION: Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that:

This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

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Use "APPLICATION FOR PERMIT" for such proposals.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
CONOCO INC.

3. ADDRESS OF OPERATOR
P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below)
At surface Unit C
660' FNL & 1450' FWL

14. PERMIT NO.
30-025-08439

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7. LEASE DESIGNATION AND SERIAL NO.
NM 2791(A)

8. INDIAN, ALLOTTEE OR TRIBE NAME

9. UNIT AGREEMENT NAME
North El Mar

5. FARM OR LEASE NAME
North El Mar Unit

6. WELL NO.
40

10. FIELD AND POOL, OR WILDCAT
El Mar Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 31-265-33E

12. COUNTY OR PARISH 13. STATE
Lea NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) temporary abandon ✓

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

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 markets and zones pertinent to this work.)

- ① MIRU. POOH w/ production equip. Make bit & scraper run to perfs.
- ② GIH w/ CIBP & pkr to $\pm 4615'$. Set CIBP @ $\pm 4615'$. Test CIBP to 1000 psi. Test backside to 600 psi.
- ③ Rel pkr & POOH. Circ. hole full of 10.0 ppg brine. Rig down.



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

SIGNED [Signature] TITLE Administrative Supervisor

(This space for Federal or State office use)

DATE 12-17-86

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 12-18-86

*See Instructions on Reverse Side

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RECEIVED
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OCD
HOBBS OFFICE