

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <i>Injection</i>		7. UNIT AGREEMENT NAME <i>MCA Unit</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>		8. FARM OR LEASE NAME <i>MCA Unit Bly 2</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460 - Hobbs, New Mexico 88240</i>		9. WELL NO. <i>157</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>1980' FNL & 1980' FWL - Unit Letter F</i>		10. FIELD AND POOL, OR WILDCAT <i>Malamas G-SA</i>
14. PERMIT NO. <i>30-025-00760</i>	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA <i>29-17S-32E</i>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		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
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) *Cased Hole Stimulation*

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 markers and zones pertinent to this work.)*

Work started on 4/22/88. P.O.H w/ hq. Drill out to 3840'. Mill from 3840'-68'. Csg collapsed, mill through. Clean out to 4031'. Set pka at 3572' & test csg to 2000 psi. G-IH w/ string mill & worked light spots to TD. G-IH w/ Kutrite shoe & cut to 3910'. G-IH w/ mill & milled to TD. Spot 3 bbls cement at 3901'. Drill out & spot resin pack at 3763'. Set cement retained & squeeze w/ 15 bbls of cement from 3510'-3763'. Drill out cement from 3506'-3763'. Drill out resin to 3933'. G-IH w/ Kutrite shoe & cut to 3940'. Cut to 3997' & fell through to 4010'. Drill to 4023'. Set lined at 4020' w/ 65 sacks of 50/50 Pozmix "C" cement. TOK at 3377'. Set retained at 3220' & cement squeeze. Drill out to 4011' PBTO. Perf 9th zone from 4000'-4007'. Perf Lower 7th zone from 3925'-81'. Perf upper 7th zone from 3830'-70'. Perf 6th zone from 3755'-80'. Return to injection.

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

SIGNED *[Signature]* TITLE *Administrative Supervisor* DATE *July 14, 1988*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JUL 21 11 51 AM '88
AUG 1 1988

*See instructions on Reverse Side