

Form 3 160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 3 1 1993

BUREAU OF	LAND MANAGEMENT	5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		_
		LC 058697B
		6. If Indian, Allottee or Tribe Name
Use "APPLICATION FO	OR PERMIT—" for such proposals	
SUBMIT IN TRIPLICA TE		7. If Unit or CA, Agreement Designation
i Type of Well		
Oil Gas Other Injection Well 2. Name of Operator		8. Well Name and No.
Conoco Inc		MCA Unit #135
3. Address and Telephone No.	TV 70705 4500 (047) 000 5500	30-025-01564
10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580		10 Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T. R. M. or Survey Description)		Maljamar Grayburg/SA
1980' FNL & 1980' FWL, Sec. 30, T17S, R33E, F		11. County or Parish, State
		Lea, NM
CHECK APPROPRIATE BOX	(s) TO INDICATE NATURE OF NOTICE, REPOR	<u> </u>
TYPE OF SUBMISSION		T, OR OTHER DATA
TIPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
\bowtie	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other Renew TA Status	Dispose Water
	Il pertinent details, and give pertinent dates, including estimated date of starting	Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
should be on file with your office. Conoco has been evaluating 3-D seismic on the seismic of the seismic on the seismic of the seismic on th	rary Abandonment status for the above referenced well. As this well to determine possible use as a producer or to combe for this well or P&A by 11/17/01. We ask that you appear to the provide of the pr	tinue as an injector. Conoco is prove this TA renewal until that
14. I hereby certify hat the foregoing is true and correct Signed Signed	Reesa R. Wilkes Title Sr. Staff Regulatory Assistant	By State
(This space for Federal or State office use)	1 A DA	/- 1
Approved by Conditions of approval if any	Title	Date
BLM(6), NMOCD(3), SHEAR, PONCA, COST ASST	, FILE ROOM, FIELD	

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