

UNITED STATES **N.M. Oil Cons. Division**
DEPARTMENT OF THE INTERIOR **1625 N. French Dr.**
BUREAU OF LAND MANAGEMENT **Hobbs, NM 88240**

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC 031670A
2. Name of Operator CONOCO INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5580/684-6381	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) Section 19, T20S, R38E, M, 1310' FSL & 1120' FWL	8. Well Name and No. B SEMU Burger, Well #126
	9. API Well No. 30 025 34127
	10. Field and Part of Exploratory Area W. Bear Monument Tubb
	11. County or Parish, State Lea County, NM

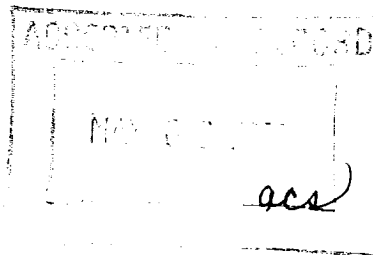
CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Repon	<input checked="" type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)*

- 3-28-00: MIRU, unseat pump, hot oil tubing, POOH w/rods, NUBOP, test to 1000# - OK - SION.
- 3-29-00: Scan tubing out of hole, RIH w/scraper to 6750', POOH w/scraper, PU, RIH w/ RBP set @ 6747'. SION.
- 3-30-00: Tested casing to 4300# - OK. Perforated wellw/2 JSPF from 6546-60', 6516-28', 6480-94', & 6444-60'. SION.
- 3-31-00: Set packer @ 6397', pumped 2000 gals 15% NeFE w/additives, pumped 75 bbls w/tr, SION.
- 4-1-00: Ran swab line, swabbed. SION.
- 4-3-00: Prep to frac. SION.
- 4-4-00: Fraced Tubb w/2000 gals pre-pad, & 40,000 gals Spectra G 3500 & 133,120# 16/30 & 40,720# Super LC. Began flowback. SION.
- 4-6-00: Ran in hole with production tubing and rod string. SION.
- 4-7-00: Well put on production.



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

Signed *Ann E. Ritchie* Title **Ann E. Ritchie
Regulatory Agent** Date **4-28-00**

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval if any:

BLM(6), **1004**

Title 18 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.

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Director, Land Management
Boswell Office

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