

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse 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 AXI Apache J No. 21 Batt.

2. NAME OF OPERATOR
Conoco Inc.

3. ADDRESS OF OPERATOR
P.O. Box 460 - Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
Unit I

14. PERMIT NO.
30-039-20437

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
1850' FSL & 790' FEL

5. LEASE DESIGNATION AND SERIAL NO.
Contract No. 147

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
AXI Apache J

9. WELL NO.
21 Batt.

10. FIELD AND POOL, OR WILDCAT
Blanco mesaverd/Otero chacara

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 5-25N-SW

12. COUNTY OR PARISH | 13. STATE
Rio Arriba | NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Dig Emergency Pit <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input 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.)*

We plan to dig an emergency pit on the existing pad at the AXI Apache J No. 21 battery in order to drain iron sulfide from several tanks. This pit will be used for approximately 10 days. The pit will then be drained and filled. The pit will also be fenced.

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

RECEIVED
OCT 02 1987
OIL CON. DIV. 1
DIST. 3

I hereby certify that the foregoing is true and correct

SIGNED DF Finney TITLE Administrative Supervisor

ACCEPTED FOR RECORD

DATE 9-22-87

(This space for internal or State office use)

APPROVED BY _____ TITLE _____

OCT 01 1987
DATE

CONDITIONS OF APPROVAL, IF ANY:
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FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

*See instructions on Reverse Side

NMOCC