

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI
(Other instructions
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 ☐	7. UNIT AGREEMENT NAME MCA Unit
2. NAME OF OPERATOR Conoco Inc.	8. FARM OR LEASE NAME MCA Unit Bly 2
3. ADDRESS OF OPERATOR P.O. Box 460 - Hobbs, New Mexico 88240	9. WELL NO. 269
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 125' FSL/129S' FEL	10. FIELD AND POOL, OR WILDCAT Maljamar B-SA
14. PERMIT NO. 30-025-23706	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA 20-17S-32E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3987' GR	12. COUNTY OR PARISH Lea
	13. STATE 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) Re-open 6th & 9th zone ☒

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 markers and zones pertinent to this work.)

MIRU. Tag for fill. Spot 320 gals of 15% HCL-NE-FE from 4040' to 3730'. POOH. Perf w/4" hollow carrier select fine csq gun w/CCK loaded w/13SPF at 3770'-4025' for total of 9 perfs. G/H w/RBP & pku. Set RBP at 4045' & pku at 3900'. Acidize w/38 bbls 15% HCL-FE mixed w/84 gals checker-sol micellar solvent. Flush to bottom w/26 BTFW. Shut-in for 2 hrs and swab well. Move RBP to 3900' & pku to 3810'. Acidize 7th w/18 bbls 15% HCL-NE mixed w/40 gals checker-sol. Shut-in for 2 hrs & swab well. Move RBP to 3810'. Swab test 6th. Acidize w/8 bbls 15% HCL-FE w/17 gals checker-sol. POOH w/RBP & pku. G/H w/producing equipment.

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

SIGNED DF FINNEY

TITLE Administrative Supervisor

DATE August 17, 1987

(This space for Federal or State office use)

APPROVAL OF
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 9-2-87

*See instructions on Reverse Side

Title 18 USC 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.

B. M. Carlsbad (6) Hondo (2) Citrus (1) Potosi (1) L.D.