

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Oil Well Gas Well Other **Injection**

2. Name of Operator

Conoco, Inc.

3. Address and Telephone No.

10 Desta Drive Ste. 100W, Midland, Tx. 79705-4500 (915) 686-5580/684-6381

4. Location of Well (Footage, Sec., T. R. M. or Survey Description)

**660' FNL & 1980' FEL
Sec 29, T20S, R38E**

5. Lease Designation and Serial No.

LC031670B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Warren Unit

8. Well Name and No.

Well # 7

9. API Well No.

30-025-07847

10. Field and Pool, or Exploratory Area

Warren Devonian

11. County or Parish, State

Lea, N.M.

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

TYPE OF SUBMISSION

- Notice of Intent
 Subsequent Report
 Final Abandonment Notice

TYPE OF ACTION

- | | |
|--------------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| <input checked="" type="checkbox"/> Other Added perfs | <input type="checkbox"/> Dispose Water |

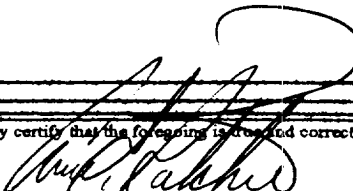
Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

6-11-99 through 6-18-99: RIH and perforated w/4 JSPF @ 7750-7755', RIH and wireline set RBP @ 7761', RIH w/treating packer, set @ 7720, tested casing and packer to 500#-held. Acidized w/1000 gals of 15% NaFE HCL, flushed w/55 bbls 2% KCL waer. Swabbed. Latched onto RBP @ 7761' POOH. Ran in hole w/ESP equip, bottom of motor @ 7705', pump intake @ 7679'. Well put on prod.

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

Signed



Title

**Ann E. Ritchie
Regulatory Agent**

Date

October 6, 1999

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval if any: _____

BLM(6)

