New Moster and Co. The Control of the Control of T

Form 3 160-5

UNITED STATES

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1625 N. Tr	المعمقة الم		FORM APPROVED
Maritan N	1 to 1 to 1 to 1		Budget Bureau No. 1004-013:
		•	Expires: March 3 1,1993

(June 1990)		T OF THE INTERIOR AND MANAGEMENT	Budget Bureau No. 1004-0135 Expires: March 3 1 ,1993 5. Lease Designation and Serial No.
Do not use this form	LC 031695A 6. If Indian, Allottee or Tribe Name		
1. Type of Well	SUBMIT	IN TRIPLICA TE	7. If Unit or CA, Agreement Designation
Oil Gas Well 2. Name of Operator	Other		8. Well Name and No. SEMU #10
3. Address and Telephone No.	100W, MIDLAND, TX	79705-4500 (915) 686-5580	9. API Well No. 30-025-07849 10. Field and Pool, or Exploratory Area
	Sec., T. R. M. or Survey Desc		Warren McKee Simpson 11. County or Parish, State Lea, NM
		TO INDICATE NATURE OF NOTICE, REPOR	
TYPE OF SU	BMISSION	TYPE OF ACTION	
	Report Onment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Request TA Status	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose: Water Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
 Describe Proposed or Complet give subsurface location 	ted Operations (Clearly state all pe is and measured and true vertical	extinent details, and give perfinent dates, including estimated date of starting a depths for all markers and zones pertinent to this work.)*	my proposed work. If well is directionally drilled,

Concco would like to request Temporary Abandonment status approval for the above referenced well. A valid MIT was run 9/6/01 and the chart is attached.

We wish to retain this wellbore for evaluation of Strawn potential. This evaluation should be completed within the next 12-18 months.

TA suproved for 12 months and

I hereby certify hat the foregoing is true and correct	Reesa R. Wilkes	
Signed Kleba Wilhes	Title Regulatory Specialist	Date9/17/01
(This space for Federal or State office 1889) 10 5 6. LAN	Title	12/5/2-01
Conditions of approval if any.	1110	Date

M(6), NMOCD(1), SHEAR, PONCA, COST ASST, FIELD, FILE ROOM.

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

Brading TO Grays

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Daily Activity Report

Conoco Inc.

SEMU #10

Lea County, New Mexico

Job #3467

9/4/01 Tuesday

MIRU Triple N rig #24. ND wellhead, NU BOP, tested BOP to 2,000 psi. Start in hole w/ bit and scraper on 86 jts tbg, started flowing back oil. SI BOP and flowed back well to pit. RU cementer and pumped 60 bbls brine down tubing. Continued in hole w/ scraper to 7,140' and SDFN.

RT: 10:00 - 6:30 8.5 hrs

CRT: 8.5 hrs

Cost today: \$2,069.00

Cost to Date: \$2,069.00

9/5/01 Wednesday

Finished RIH w/ bit and scraper to 8.583', tagged PBTD. POOH w/ bit & scraper. RIH w/ 7" HM tbg-set CIBP to 8,551'. RU cementer and set CIBP. Circulated hole w/ freshwater and pumped 40 bbls mud followed by 25 sx C cmt on top of CIBP. Start OOH w/ tbg and SDFN.

RT: 10:00 - 6:30 8.5 hrs

CRT: 17.0 hrs

Cost today: \$3,953.50

Cost to Date: \$6,022.50

9/6/01 Thursday

Finished POOH w/ tbg. RIH w/ 7" HM tbg-set CIBP to 7,598'. Set CIBP. RU chart recorder and ran MIT, passed. Called out packer fluid and circulated hole w/ packer fluid. POOH laying down tubing. ND BOP, NU wellhead. SDFN.

RT: 8:00 - 7:00 11.0 hrs

CRT: 28.0 hrs

Cost today: \$3,476.00

Cost to Date: \$9,498.50

9/7/01 Friday

RDMO to SEMU #90.

RT: 7:00 - 8:00 1.0 hrs

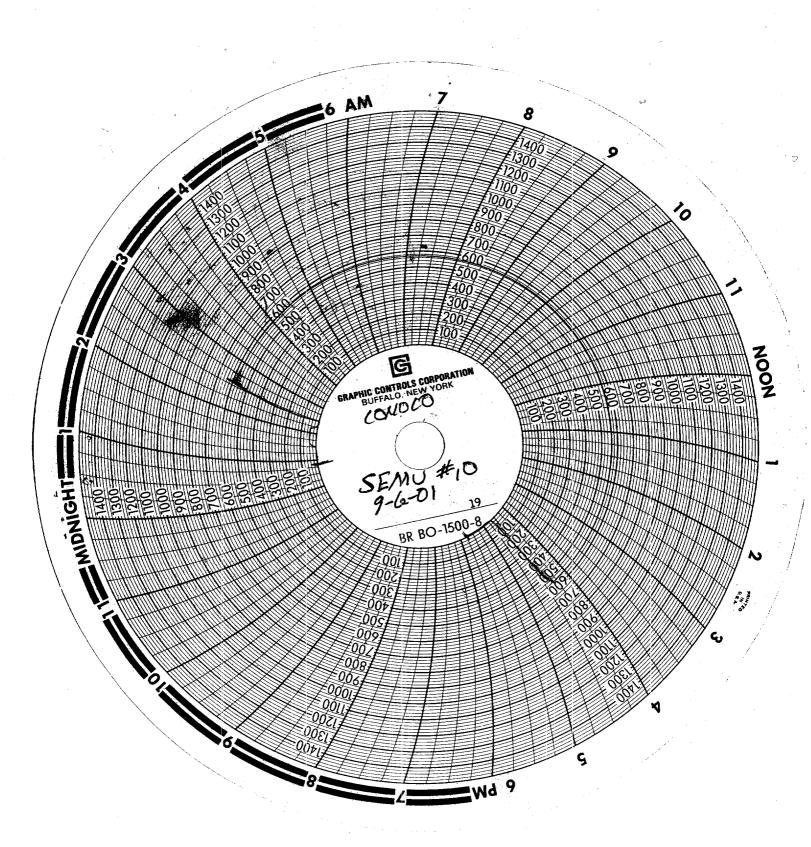
CRT: 29.0 hrs

Cost today: \$291.00

Cost to Date: \$9,789.50

85:91 13 FM 9:58

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Jose V Serv 9-6-01

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UNITED STATES DEPARTMENT OF THE INTERIOR

	Page1 of2_	
	IDENTIFICATION	
IID		
Lease	NMLC031695A	
CA		

Number KAH-L54-01

Certified Mail - Return Receipt Requested 700016700009829335	!				INTERIC NAGEMEN		IID Lease	NMLC031695A	
		NOTIO	CE OF V	VRITTE	N ORDER		CA Unit PA	NMNM71041D	
Bureau of Land Managemer	ot Office			Operator			IrA	INVINIVI/ 1041D	
- 935	OBBSJNSPECTIO	N OFFICE		Орегаю	CON	IOCO INCORI	PORATE	:n	
Address	414 WEST TAY HOBBS NM 88	LOR		Address	Address 10 DESTA DRIVE WEST, SUITE: 100 W. MIDLAND TX 79705				
Telephone	505.393.361	2		Attention					
Inspector									
N	HASTON	Tara di Santa	Im	-T	1-				
Site Name SEMU	Well or Facility	1/4 1/4 Section	Township	Range	County	Sta		Meridian	
Site Name	10 Well or Facility	SENW 29 1/4 1/4 Section	20S Township	Range	County	Sta	NM_	NMP Meridian	
	, and an admity	The Control	Township	Kange	County		ic	Mendian	
Site Name	Well or Facility	1/4 1/4 Section	Township	Range	County	nty State Meridian			
	The following condition	on(s) were found by l	Bureau of Land I	Management Insp	ectors on the date an	d at the site(s) listed	above.		
Date	Time (24-hour clock)	Corrective Act	ion to be	Date Corrected	Date Authority Ref		hority Refe	ference	
06/05/2001	14:30	7-20 07/12/2	-01			43 CFR 3162.3-4 (a,b,c)			
undry notice, of the r Sundry Notice. 3/2 /12/99 - was filed an . Plug and abandor Remarks continued o	25/99 - Sundry Noti Id "Accepted for Re In the well: Submit S	ce - Subsquer cord" - no pro Sundry Notice :	nt Report - re duction repo	epair tubing orted since 3	and Well put b /98.	ack on produc	ction 9 Regi	Jell TAd + lalic chart ru balic chart ru -6-01; see Trust (copy) sul 9-17-01	
hen the Written Order is	complied with, sign th	is notice and retur	m to above ad	dress.	_				
ompany Representative	ritle Regulato	y Spoo	Sig	gnature /	resa Wi	lbes	Date	: 7-17-01	
ompany Comments	onoco plan	to to B	allot	Partner	s to re	m and	5SP,	Partners	
VIII I	ed upon pl	10 10			yect pro	spasal.	An I	Intent will b	
					Written Order	correction and re-	ortina tin	ne frames begin upon rece	
is Notice or 7 business di ported to the Bureau of L all be issued an Incident	ays after the date it is mand Management Office of Noncompliance (INC	nailed, whichever be at the address s C) in accordance	is earlier. Eac hown above. with 43 CFR 3	th stipulation m If you do not co (163.1(a). Failt	ust be corrected vomply as noted ab	vithin the prescrib ove under "Corre h the INC may res	ed time fi ctive Acti	om receipt of this Notice on to be Completed By", ssments as outlined in 43 ay after the prescribed tim	
63.2(f)(1), provides that	any person who "know	ingly or willfully	" prepares, ma	aintains, or subt	nits false, inaccur	ate, or misleading	reports 1	regulations at Title 43 Chotices, affidavits, records ontinues, not to exceed a	
]	Review and	Appeal Righ	ts				
person contesting a decise propriate State Director (A 22203 (see 43 CFR 31)	see 43 CFR 3165.3). 1	e Director review The State Director	of the Written	Order. This re	equest must be file	or Board of Land	cing days Appeals,	of receipt of the Notice wi 1015 Wilson Blvd, Arling	
gnature of Bureau of Land M	lanagement Authorized Off	ficer		Date	-7-01	Time //-	:06		

FOR OFFICE USE ONLY

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Type of Inspection

Number

Date

DECIPE Serve

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GEVEO BR

BLM Remarks, continued

procedure for each well to be approved by the Authorized Officer.

3. Conversion to beneficial use: If the well is be used for beneficial purposes, include a brief description of your proposed plans of economic feasibility with an anticipated date for completion.

HEOEVED 19 9.58