

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

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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

2. Name of Operator

Conoco Inc.

3. Address and Telephone No.

10 Desta Drive STE 100W, Midland, TX 79705 (915)686-5424

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

2310' FNL & 1800' FEL, SEC. 30, T-19S, R-25E, UNIT LTR 'G'

5. Lease Designation and Serial No.

NM 0559175

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

DAGGER DRAW COM #12

9. API Well No.

30-015-27012

10. Field and Pool, or Exploratory Area

N DAGGER DRAW UPPER PENN

11. County or Parish, State

EDDY, NM

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

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other CHG LEASE NAME

☐ 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.)

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.)*

PLEASE CHANGE THE LEASE NAME FROM DAGGER DRAW #12 TO DAGGER DRAW COM #12
PER REQUEST FROM THE BLM OFFICE.

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

Signed Paul R. Rauschky

Title SR REGULATORY SPEC

Date 10-21-92

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____