Form 3 160-5 (June 1990)	UN DEPARTME BUREAU OF	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 3 1,1993 5. Lease Designation and Seriai No.		
Do not use th	is form for proposals to di	AND REPORTS ON WEL rill or to deepen or reentry to DR PERMIT—" for such prop	a different reservoir	NM 04202 6. If Indian, Allonee or Tribe Name
	SUBMIT	7. If Unit or CA, Agreement Designation		
1. Type of Well  Oil Well  2. Name of Operator  3. Address and Teleph  10 DESTA D  4. Location of Well (	CONOCO INC. CONOCO INC. IONE NO. DR. STE. 100W, MIDLAND Footage. Sec., T. R. M. or Survey De Section 9	D, TX. 79705-4500 (915) 68  (915) 68  (915) 68  (915) 68  (915) 68  (915) 68  (915) 68  (915) 68  (915) 68	DEGETTION MAY 1 7 193 MAY 1 7 193 BOST. B	Johnston LS #5  9. API Well No.  30-045-07551  ith Field and Pool, or Exploratory Area  Blanco Mesaverde  11. County or Parish, State
tn CHEC	CK APPROPRIATE BOX	(s) TO INDICATE NATURE	OF NOTICE, REPOR	San Juan, NM T. OR OTHER DATA
	OF SUBMISSION		TYPE OF ACTION	, , , , , , , , , , , , , , , , , , , ,
☐ Sui	tice of Intent  bsequent Repon  al Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other		Change of Plans  New Construction  Non-Routine Fracrumg  Water Shut-Off  Conversion to Injection  Dispose Water  INole: Reponresults of multiple completion on Wdl  Completion or Recompletion Report and Log form.)
-		pertinent details, and give pertinent dates, cal depths for all markers and zones pertinent dates. This well. The procedure is curn	eent to this work.)	ll be sent by June 15, 1999.
				99 MAY 13 AM 11: 23 070 FARMINGTON, NM

14. I hereby cartify that the foregoing is tribe and correct  Signed	<del></del>	Kay Maddox Regulatory Agent	Date May 10, 1999
(This space for Federal or State office use)			
Approved by Title Conditions of approval if any:	-		Date
BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM	ACCEPTED FOR RECORD		
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and will or representations as to any matter within its junsdiction.	llfully	to make to any department or agency of th	e United States any false, fictitious or fraudulent statements

\*See Instruction on Reverse Side

FARMINGTEN HELD OFFICE

NMOCD