

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instruction
reverse side)

Form 100-1, Bureau of Land Management
Revised August 31, 1985
5. LEASE DESIGNATION AND SERIAL NO.

NUM-315712

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ Injection Well	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Conoco Inc.	8. FARM OR LEASE NAME Maljamar Grayburg Unit
3. ADDRESS OF OPERATOR PO Box 440 Hobbs NM 88240	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Maljamar G-5A
14. PERMIT NO.	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA 9-175-32E
15. ELEVATIONS (Show whether OF, RT, GR, etc.)	12. COUNTY OR PARISH HCA
	13. STATE NM

16. 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)

PULL OR ALTER CASING

MULTIPLE COMPLETION

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.)

Notified BLM prior to RU.

Set CIBP at 3673'. Spot 25 sks cement on top of CIBP.

head hole w/mud. Run in hole to 925' + shot 4 holes.

Pump 329 sk cement to form. Die to annul. 5 1/2 + 8 5/8

csq. Pump 25 sks cement. Erect P/A marker. Restore location.

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

SIGNED W R Baker

TITLE Administrative Supervisor

DATE Jan 24, 1990

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE PETROLEUM ENGINEER

DATE 2-26-90

and is to remain until surface restoration is completed.

*See Instructions on Reverse Side