

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI
(Other Instructio
verse side)

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Form approved.
Budget Bureau No. 1004-001
Expires August 31, 1985

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 ☒ <i>Injection</i>	5. LEASE DESIGNATION AND SERIAL NO. <i>LC-429405B</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>P.O. Box 460 - Hobbs, NM 88240</i>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>1980' FSL & 1980' FEL</i>	8. FARM OR LEASE NAME <i>William Mitchell B</i>
	9. WELL NO. <i>#8</i>
	10. FIELD AND POOL, OR WILDCAT <i>Majama G-5A</i>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 17 T17S R32E</i>
14. PERMIT NO. <i>30-025-00593</i>	12. COUNTY OR PARISH <i>Lea</i> 13. STATE <i>NM</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>4018' KB</i>	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
(Other) ☐	

(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.)*

See attached wellbore diagram.

RECEIVED
OCT 27 10 45 AM '89

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

SIGNED *Maxine Benjamin W. W. Baker*

TITLE *Administrative Sup'r.*

DATE *Oct. 25, 1989*

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE *11-1-89*

Approved as to plugging of the well bore,
Liability under bond is retained until
surface restoration is completed.

*See Instructions on Reverse Side

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NOV 2 1989

OOD
HOBBS OFFICE

Mitchell 'B' No 8

1780 FGL + 1780 FEL
SEC 17, T-17S, R-32E

EL. LF-4007.
KB-4018.3

Well Bore Diagram

Cellar Filled
w/CMT and/or SAND
To surface contour

ABANDONMENT MARKER
"MITCHELL 'B' No 8"
T-17-T19S-R32E

3' or BTM of cellu
whichever is
greater

8 5/8", 24# @ 229'
w/100 sx (circ)

Fill w/43 sx class 'C'
@ 279' - 0

TS - 873'
BS - 1930'

10 PPS
mud

25 sx class 'C' w/2% C-CL₂
(3673 - 3447')

- SET RBP @ 3422

3758 - 68' > 1 JSPF
3784 - 90' >
3812 - 22' >
3828 - 38' > 2 JSPF

BTM Fill Tagged @ 4015'
9/6/68

5 1/2", 14# @ 4200'
w/775 sx CMT
(Csg rec. procated)

9-29-89 Dma