

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-C29509H

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 ☒ <i>Injection Well</i>	7. UNIT AGREEMENT NAME <i>MCA Unit</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>	8. FARM OR LEASE NAME <i>MCA Unit Bly 2</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460 - Hobbs, New Mexico 88240</i>	9. WELL NO. <i>70</i>
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 - Unit Letter 5</i>	10. FIELD AND POOL, OR WILDCAT <i>Maljamar G-SA</i>
14. PERMIT NO. <i>30-025-00664</i>	11. SEC., T./R., M., OR BLK. AND SURVEY OR AREA <i>21-17S-32E</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>NM</i>

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 COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) *Convert To Cased Hole* ☒

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 and 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.)

Work started 8/17/88. MIRA. CO 1/2" jet wash OH to TD. Run 4 1/2" liner from 4004'-3312'. Cement w/ 200 sxs 50/50 pgs. Reverse out 5 bbl. Drill out cement on top of liner. Test lined top to 1000 psi. Held okay. Run CBL. CBL indicated poor bond. Perf 3944-53' at 2 spf. Spot 2 bbls acid, pmpd acid 1 BPM at 1500 psi. Run inj profile. Perf 6th & 7th zones. Run injection equipment. Work completed on 9/9/88.

18. APPROVE AND SIGN (Indicate whether this is a notice or report.)

[Signature]

TITLE: Administrative Supervisor

DATE: October 17, 1988

ACCEPTED FOR RECORD

OCT 31 1988

The Instructions on Reverse Side CARLSBAD, NEW MEXICO