

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

Form 3 160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

LC 029509A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA Unit #71

9. API Well No.

30-025-00612

10. Field and Pool, or Exploratory Area

Maljamar Grayburg/SA

11. County or Parish, State

Lea, NM

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 DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580

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

1980' FSL & 660' FEL, Sec. 21, T17S, R32E, I

IN 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 Change Tubing String

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

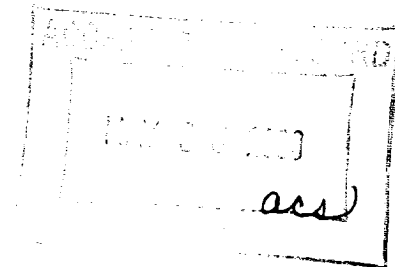
☐ Dispose Water

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.)*

4/14/00 Drove unit to location. Held safety meeting, RU unit. Bled well down; put BOP on, laid down 86 x 2 7/8 jts. TIH w/OPMA x 2 7/8 SN & 115 x 2 3/8 jts. Took BOP off, flanged well up. Left well to flowline. SDOW

4/17/00 Drove crew to location. Held safety meeting. Bled well down, picked up new rods & pump. Spaced well out; hung well on. Checked pump action, tested tubing to 500 psi - O.K. RDMO



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

Signed Reesa Wilkes

Reesa R. Wilkes

Title Sr. Staff Regulatory Assistant

Date 05/03/00

(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, FIELD

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

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C
GWW

RECEIVED
2000 MAY -14 A 10:26
JAMES H. LAMBERT
ROSWELL OFFICE

300
Hobbs
Reservoir