

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
(Other instruction on reverse side)

DATE

LEASE DESIGNATION AND SERIAL NO.
LC-029509B
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

2. NAME OF OPERATOR
Conoco Inc.

3. ADDRESS OF OPERATOR
P.O. Box 460 - Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1980' FNL & 1980' FWL

14. PERMIT NO.
30-025-00632

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

7. UNIT AGREEMENT NAME
MCA Unit Bty 3

8. FARM OR LEASE NAME

9. WELL NO.
#39

10. FIELD AND POOL, OR WILDCAT
Maliamar G-SA

11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA
Sec. 22, T17S, R32E

12. COUNTY OR PARISH
Lea

13. STATE
NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other) <u>Casing Integrity Test</u>	☒
(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.)

3/27/90 Set RBP @ 3421' and pressured up to 500 psi for 30 min. Held. See attached chart.

T.A. PERMIT

RECEIVED
APR 24 11 02 AM '90
GAS AREA

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

SIGNED H.A. Ingram TITLE Conservation Coordinator DATE 4/18/90

(This space for Federal or State office use)

APPROVED BY _____ TITLE PETROLEUM ENGINEER DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Subject to
Like Approval
by State

*See Instructions on Reverse Side