

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

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 & 1980' FWL, Sec. 26, T17S, R32E, K

5. Lease Designation and Serial No.

LC 058699X

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA Unit #188

9. API Well No.

30-025-00709

10. Field and Pool, or Exploratory Area

Maljamar Grayburg/SA

11. County or Parish, State

Lea, NM

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 Casing Integrity Test
☐ 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.)*

It is proposed to perform a Casing Integrity Test on the subject well in preparation for requesting temporary abandonment status approval.
The following procedure will be followed:

1. POOH w/production equipment
2. Set a CIBP within 50' of top perf
3. Notify the BLM/OCD 24 hours before pressure testing casing to 500 psi for 30 minutes
4. RIH w/tubing and circulate packer fluid
5. POOH w/tubing and fill hole w/packer fluid

When completed, the chart from the CIT will be submitted with a reason and a request for TA status.



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

Signed Reesa Wilkes

Title Reesa R. Wilkes
Regulatory Specialist

Date 10/24/01

(This space for Federal or State office use)

Approved by

JOE G. LARA

Title

Assistant Director

Date

12/14/2001

Conditions of approval if any:

BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FIELD, FILE ROOM

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