

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993  
5. Lease Designation and Serial No.  
**LC 0572100**  
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 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 (915) 686 - 5424

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

SURFACE: 119' FNL & 660' FWL, SEC. 27, T 17S, R 32E, UNIT LTR 'D'  
TD:

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA UNIT #119

9. API Well No.

30-025-00726

10. Field and Pool, or Exploratory Area

Maljamar Grayburg SA

11. County or Parish, State

LEA, NM.

12. **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  
**REPLACE PACKER**

☐ 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.)\*

3-13-95 MIRU. POOH W/ TBG AND PACKER. GIH W/ NEW PACKER SET @ 3750' AND TBG  
CIRC PACKER FLUID, TEST CSG FOR 30 MIN, CUT CHART, ATTACHED.  
3-14-95 RDMO. RETURN WELL TO INJECTION

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

Signed Bill R. Keathly Title SR. REGULATORY SPECIALIST  
(This space for Federal or State office use)

Date 5-3-95

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

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**