

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

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA UNIT
WELL # 152

9. API Well No.

30-025-00736

10. Field and Pool, or Exploratory Area

MAJAMAR GRAYBURG SA

11. County or Parish, State

LEA, NM

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 ☒ INJECTION
Other

2. Name of Operator

CONOCO INC.

3. Address and Telephone No.

10 DESTA DR. STE 100W, MIDLAND, TX. 79705 (915) 686-5400

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

SURFAC 1980' FNL & 1980' FWL, SEC. 28, T 17S, R 32E, UNIT LTR 'F',
TD:

2. 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
CSG 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.)

3. 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.)*

7-9-96 MIRU. GIH RELEASE ON-OFF TOOL, POOH W/ PACKER & TBG. GIH W/ PACKER & TBG, PACKER SET
AT 3640'. CIRC PACKER FLUID, TEST CSG TO 700# HELD, CUT CHART (COPY ATTACHED).
7-10-96 RDMO. RETURN WELL TO ACTIVE INJECTION.

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

Signed Bill R. Keathly Title SR. REGULATORY SPECIALIST Date 8-6-96

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any

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

MCA 152
UNIT LETTER "F"
SRC 28 T 175 ~~R~~ R-32E
FED LSE NO. LC 057210
96 MIN. CLOCK
30 MIN. CHART

7-17-96

GOLD STAR UNIT #11

OCT. WAS NOTIFIED
NOT WITNESS BY OCT.

Hoss 