

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

New Mexico Oil Conservation Division, District 1
1625 N. French Drive
Hobbs, NM 88249
APPROVED
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 Injection Well

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)

660' FSL & 660' FWL, Sec. 29, T17S, R32E, D

5. Lease Designation and Serial No.

LC 029410A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA Unit #109

9. API Well No.

30-025-00759

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 Repair Tubing Leak & Run CIT
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

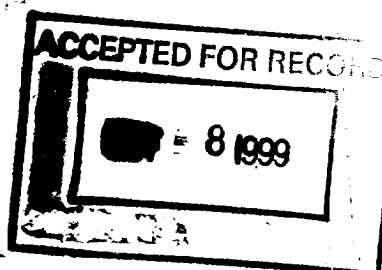
Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

9/22/99 MIRU, nut down Ajax BOP and NUBOP

9/23/99 Release off on/off tool and scan tubing; did not find any holes. Replaced green band and RIH w/redressed retrieving head. Latch on the on/off tool and test tubing; no leaks. Released off on/off tool and circulated packer fluid. Latch onto on/off tool and test casing to 500# for 30 minutes with no leaks (chart attached). NDBOP and flang up wellhead.

9/24/99 RDMO



(ORIG. SGD) GARY GOURLEY

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

Signed Reesa Wilkes

Reesa R. Wilkes

Title Sr. Staff Regulatory Assistant

Date 10/6/99

(This space for Federal or State office use)

Approved by _____ Title _____
Conditions of approval if any: _____

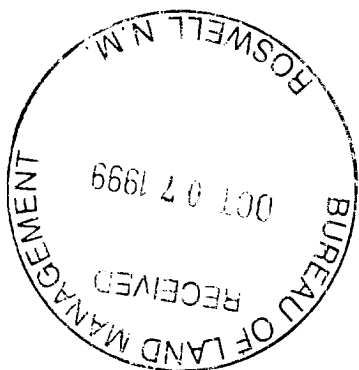
Date _____

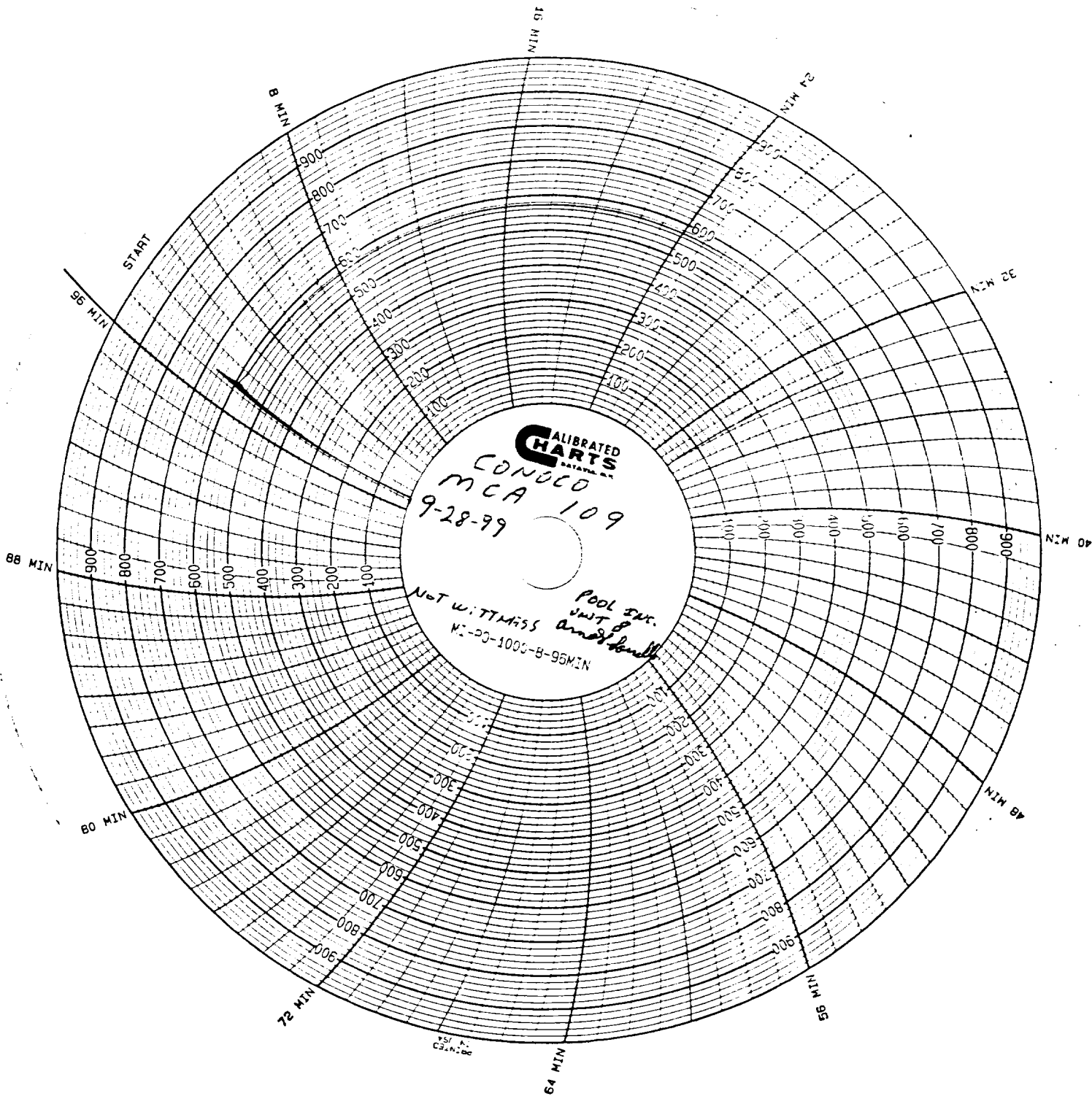
BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM, FIELD

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

JCS GWW





9-28-99

LONOCO MCA #109

UNIT LETTER D

SEC. 29-TT75-R32E

Fed. LSE. NO. LC-029410A

Pool INC UNIT 8 *and Sonelle* Arnold Sorrells

