

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 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 <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection Well	5. Lease Designation and Serial No. LC 029410B
2. Name of Operator Conoco Inc	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) 660' FNL & 660' FWL, Sec. 30, T17S, R32E, D	8. Well Name and No. MCA Unit #104
	9. API Well No. 30-025-00777
	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	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Casing Integrity Test	<input type="checkbox"/> 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/injection equipment **50'**
2. Set a CIBP within **100'** 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 with 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 Regulatory Specialist	Date 8/15/01
(This space for Federal or State office use)		
Approved by (ORIG SGD.) JOE G. LARA	Title Petroleum Engineer	Date 9/13/2001
Conditions of approval if any:		

BLM(6), NMOCD(3), 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