CCD-Holds -;

Form 3 160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 3 1,1993

BUREAU OF LAND MANAGEMENT		Expires: March 3 1,1993
		5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		LC 059002
		6. If Indian, Allottee or Tribe Name
Use "APPLICATION FO	R PERMIT—" for such proposals	
SUBMIT IN TRIPLICA TE		7. If Unit or CA, Agreement Designation
I. Type of Well		·
		7
Unit Gas Well Other Injection Well 2. Name of Operator		8. Well Name and No.
Conoco Inc		MCA Unit #229
		9. API Well No.
10 DESTA DR STE 100W MIDI AND TV 70705 4500 (045) 000 500		30-025-00820
10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T. R. M. or Survey Description)		
1980' FNL & 660' FWL, Sec. 34, T17S, R32E, E		Maljamar Grayburg/SA 11. County or Parish, State
		or a mish, State
		7. 304
CHECK APPROPRIATE BOX(s	TO INDICATE NATURE OF NOTICE	Lea, NM
) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	П	
	Abandonment	Change of Plans
Subsequent Report	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
Final Abandonment Notice	Casing Repair	Water Shut-Off
L Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other Renew TA Status	Dispose Water
		Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
give subsurface locations and measured and true vertica	ertinent details, and give pertinent dates, including estimated date of starting depths for all markers and zones pertinent to this work.)*	g any proposed work. If well is directionally drilled,
	e to principal and markers and zones pertinent to this work.)*	
Conoco requests renoval anneces of ST.	AT 1	
should be on file with your office. The State I	y Abandonment status for the above referenced well.	A valid MIT was run on 8/26/97 and
should be on file with your office. The State ha	s approved until 8/26/02.	
We wish to retain this wellhors for further and	estion of Occurrence 100 and 1	
within the next 12-18 months.	ation of Queen and San Andres formation potential. T	This evaluation should be completed
within the next 12-16 months.		
Note to Operator:		7000 TO
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Note to operator: TA request mapproved due to AHA approval	Sara	
111 request uneggroved	2000	
the Alexander	2 A NOCE	r o
aue to the approval	dage of the same o	De Carrier Control of the Control of
	isan coag Rein III 💩	S O B
05 7/12/2000.	As a martial of the service and the service an	z w 🦂
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14. I hereby certify that the foregoing is true and correct	D D. W.	
K appa lililban	Reesa R. Wilkes	•
Signed V State W CRES	Title Sr. Staff Regulatory Assistant	Date8/8/00
(This space for Federal or State office use)		
Approved by	Title CRANE OF THE OF T	Data
Conditions of approval if any:	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date A fands
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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.

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