

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Other instructions
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME <i>MCA Unit</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>		8. FARM OR LEASE NAME <i>MCA Unit Bty 1</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460 - Hobbs, New Mexico 88240</i>		9. WELL NO. <i>101</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>660' FSL & 1980' FEL - Unit Letter O</i>		10. FIELD AND POOL, OR WILDCAT <i>Maljaner G-SA</i>
14. PERMIT NO. <i>30-025-08043</i>	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA <i>19-17S-32E</i>
		12. COUNTY OR PARISH <i>Lea</i>
		13. STATE <i>NM</i>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) *Cleanout & Scale Inhibitor*

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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.)

Work started on 9/18/87. POOH w/ rods & pump. Tag at 3610'. Bridge from 3610'-35'. Tag at 3977'. Clean out to 3982'. Spot solution from 3960'-3550'. Circ out solution. Spot 40 bbls 15% HCL-NE-FE acid from 3960'-3550'. Circ out acid. POOH. Rmpd scale inhibitor. Run producing equipment & place on production.

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

SIGNED *Carl O. Yarbrough*

TITLE *Administrative Supervisor*

DATE *July 22, 1988*

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVAL OF
COMMISSIONS OF APPROVAL, IF ANY:

TITLE

Debra H. Carter
JUL 27 1988

*See instructions on Reverse Side

CARLSBAD, NEW MEXICO

Title 18, U.S. 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.

BLM-Carlsbad (6) OXY (1) FPCO (1) File

RECEIVED

JUL 26 11 27 AM '88