

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
SUNDRY NOTICES AND REPORTS ON WELLS

SUBMIT IN TRIPlicate  
(Other instructions or  
fees apply)

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

5. LEASE DESIGNATION AND SERIAL NO.

LC-029405(A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit Bldg 1

9. WELL NO.

331

10. FIELD AND POOL, OR WILDCAT

Malamar 6/SA

11. SEC., T., R., E., OR BLK. AND  
SURVEY OR AREA

Sec. 20-175-32E

12. COUNTY OR PARISH

Lea

13. STATE

NM

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ IND. well

2. NAME OF OPERATOR  
CONOCO INC.

3. ADDRESS OF OPERATOR  
P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface Unit D

14. PERMIT NO.

30-025-08051

15. ELEVATIONS (Show whether OF, RT, GR, etc.)

660' FNL & 460' FWL

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

repair surf. wtr flow

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

SUBSEQUENT REPORT OF:

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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.)\*

- ① MIRU and kill well w/ weighted fluid (15 bbls)
- ② Change out injection equipment
- ③ Rig up pmp truck to bradenhead valve
- ④ Run tracer survey
- ⑤ Bradenhead sqz the csg-csg annulus as follows:
  - a. Lead-in w/ 2 bbls salt saturated brine
  - b. Pmp 2 bbls fresh wtr spacer
  - c. Pmp 20 bbls Flo-Chek
  - d. Tail-in w/ 115 sxs class "H" cmt
  - e. Displace cmt thru wellhead w/ fresh wtr
- ⑥ Shut-in bradenhead valve and install pop-off valve set @ 800 psi
- ⑦ Install injection equip.
- ⑧ Acidize w/ 24 bbls 15% HCL-NE-FE acid; flush w/ 14 bbls TFW
- ⑨ Return to injection

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

SIGNED

TITLE

Administrative Supervisor

DATE

11-20-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

11-26-85

CONDITIONS OF APPROVAL, IF ANY:

Subject to  
Like Approval  
by State

\*See Instructions on Reverse Side

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-Carlisbad (6) ARCO (2) Cities (1) PLC (1) File

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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fed <input type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	LC-029405(A)

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)</small>	
1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <u>In well</u>	7. Unit Agreement Name <u>MCA</u>
2. Name of Operator <u>CONOCO INC.</u>	8. Farm or Lease Name <u>MCA Unit Bty 1</u>
3. Address of Operator <u>P. O. Box 460, Hobbs, N.M. 88240</u>	9. Well No. <u>331</u>
4. Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>460</u> FEET FROM THE <u>West</u> LINE, SECTION <u>20</u> TOWNSHIP <u>17S</u> RANGE <u>32E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Maljamar G/SA</u>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <u>Lea</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> FULL OR ALTER CASING <input type="checkbox"/> OTHER <u>repair surf. wtrflow</u> <input checked="" type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

① MRO and Kill well w/ weighted fluid (15 bbls)  
 ② Change out injection equipment  
 ③ Rig up pmp truck to bradenhead valve  
 ④ Run tracer survey  
 ⑤ Bradenhead sqz the csg-csg annulus as follows:  
   a. Lead-in w/ 2bbls salt saturated brine  
   b. Pmp 2bbls fresh wtr cushion  
   c. Pmp 20 bbls Flo-Chek  
   d. Tail-in w/ 115 sxs Class "H" cmt  
 ⑥ Shut-in bradenhead valve and install pop-off valve set @ 800 psi  
 ⑦ Install injection equip.  
 ⑧ Acidize w/ 24 bbls 15% HCL-NE-FE acid; flush w/ 14 bbls TFW  
 ⑨ Return to Injection

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Kerry L. Sexton TITLE Administrative Supervisor DATE 11-20-85

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

NOV 27 1985