

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OIL CONS. COM. DIVISION
P. O. BOX 1990
HOBBS, NEW MEXICO 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
☐ Oil Well ☐ Gas Well ☒ Other **INJECTION**

2. Name of Operator
Conoco Inc.

3. Address and Telephone No.
10 Desta Drive STE 100W, Midland, TX 79705 (915)686-5424

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 1980' FWL, SEC. 19, T-17S, R-32E, UNIT LTR 'N'

5. Lease Designation and Serial No.

LC 029405B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA UNIT BTY 1 #102

9. API Well No.

30-025-12579

10. Field and Pool, or Exploratory Area
MALJMAR (G-SA)

11. County or Parish, State

LEA, NM

12. **CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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 CHANGE PACKER	<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.)*

4-28-93 MIRU. POOH W/ TBG & PACKER. GIH W/ 112 JTS IPC TBG AND OTIS INTER LOCK
PACKER SET @ 3445'. CIRC PKR FLUID. TEST CSG TO 500# FOR 30 MIN. HELD.
4-30-93 RDMO. RETURNED WELL TO INJECTION

CIT TEST WITNESSED BY OCD. CHART ATTACHED.

RECEIVED
MAY 11 10 31 AM '93
CARLSBAD, NM
David R. Glass
1993

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

Signed

Title

SR. REGULATORY SPEC

Date **5-7-93**

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

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

