

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. <u>30-025-12764</u>	
5. Indicate Type of Lease <u>Federal</u>	STATE ☐ FEE ☐
6. State Oil & Gas Lease No.	

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" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER <u>Injection</u>	7. Lease Name or Unit Agreement Name <u>MCA Unit Bty 1</u>
2. Name of Operator <u>Conoco Inc.</u>	8. Well No. <u>99</u>
3. Address of Operator <u>P. O. Box 460 - Hobbs, NM 88240</u>	9. Pool name or Wildcat <u>Maljamar G-5A</u>
4. Well Location Unit Letter <u>P</u> : <u>25</u> Feet From The <u>South</u> Line and <u>25</u> Feet From The <u>East</u> Line Section <u>19</u> Township <u>17S</u> Range <u>32E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: <u>CO₂ Stage 1 - Convert to Producer</u> ☒

12. 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.

M.R.U. fet wash open hole from 3900'-4010'. G1H w/pk & workstring. Set pk at 3700'. Load backside to 500 psi. Establish injection rate. Pump 50 sxs 50/50 psg class "c" w/0.7% CaCl₂ & 0.45 GPS D-604 followed w/35 sxs class "H" thixotropic w/10" cal-seal per sxs & 2% CaCl₂. Displace cement. G1H w/3 3/4" bit, set sub, DCs & workstring. DO cement to 3970'. Perf 3668'-3894' w/1 jsp. Set pk at 3600'. Pump 15 bbls acid divert w/100# rock salt mixed in 100 gals gelled 10" brine. Pump 20 bbls acid, divert w/200# salt mixed in 3 bbls gelled brine. Pump 20 bbls acid, divert w/250# salt mixed in 3.5 bbls gelled brine. Pump 8 bbls acid & flush w/45 bbls filtered injection water. SI for 2 hrs. Flow back load. Monitor rate & pressure. For further information contact Barry at 397-5893.
Schneider

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

SIGNATURE [Signature] TITLE Administrative Supervisor DATE January 30, 1989
TYPE OR PRINT NAME D. F. Finney TELEPHONE NO. (505) 397-5800

(This space for State Use)

FOR RECORD ONLY

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

nmcc - Hobbs (3) file

FEB 07 1989

FEB 11 1989

RECEIVED
FOR RECORD ONLY
FEB 8 1989
OCD
HOBBS G. ACE