

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

F.M. OIL CONS. PERMISSION  
P.O. BOX 1980  
DOBBS, 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

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)

~~2700~~  
2600' FNL & 25' FWL, SEC. 27, T-17S, R-32E, UNIT LTR 'E'  
~~2600~~

5. Lease Designation and Serial No.

LC 057210X

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCA UNIT BTY 2 WELL 149

9. API Well No.

30-025-12792

10. Field and Pool, or Exploratory Area

MALJAMAR (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

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

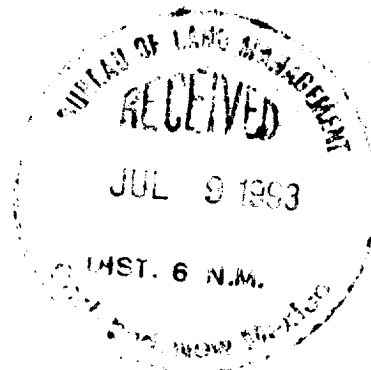
- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other ACIDIZE

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ 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.)\*

6-17-93 MIRU. PUMP 100 bbl 15% NEFE HCL ANTISLUDGE ACID HEATED TO 120 F. FLUSH W/ 25 bbl FRESH WATER.  
6-17-93 RDMO. RETURN WELL TO PRODUCTION.



*J. Lara*  
12 1993

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

Signed

*Bill R. Kunkley*

Title

SR. REGULATORY SPEC

Date

7-7-93

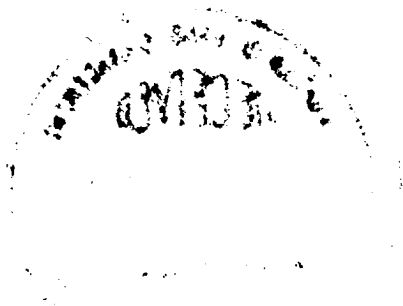
(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:



RECEIVED