

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

FORM APPROVED
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)

2615' FSL & 2750' FEL, SEC. 27, T-17S, R-32E, UNIT LTR 'J'

5. Lease Designation and Serial No.
LC 0572100

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
M C A UNIT #182

9. API Well No.
30-025-12793

10. Field and Pool, or Exploratory Area

MAJAMAR (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

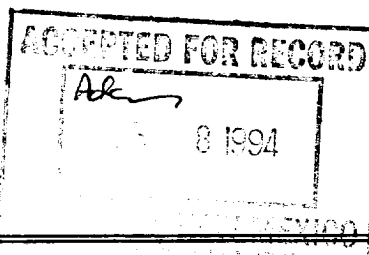
- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other PUT ON PUMP

- ☐ 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.)*

12-29-93 MIRU. POOH W/ TBG & PACKER. GIH W/ 124 JTS 2 3/8" TBG TO 3943', RODS AND PUMP.
1-3-94 RDMO. RETURN WELL TO PRODUCTION.



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

Signed David A. Keady

Title SR. REGULATORY SPEC

Date 1-20-94

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____