Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.: LC 029509A

6. If Indian, Allottee or Tribe Name:

SUBMIT IN TRIPLICATE

7. If Unit or CA, Agreement Designation:

1. Type of Well: ☐ Oil Well ☐ Gas Well ☒ Other Injection

8. Well Name and No.: MCA Unit No. 262

2. Name of Operator: Conoco, Inc.

9. API Well No.: 3002523660

3. Address and Telephone No.: 10 Desta Dr. Ste 100W, Midland, TX 79705

10. Field and Pool, or Exploratory Area: Maljamar Grayburg SA

4. Location of Well (Footage, Sec., T., R., M., or Survey Description): Unit Letter "E", 2615' FNL & 25' FWL, Sec. 21, T-17S, R-32E

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	
☒ Notice of Intent	☐ Abandonment	☐ Change of Plans
☐ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other Csg Integrity Test	☐ 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.)*

It is proposed to perform the following operations in order to prepare this well for temporary abandonment:
1. Set plug in on-off tool & bleed off tbg.
2. Install & test BOP.
3. Test csg to 500 PSIG for 30 mins. (Contact Hobbs NMOCD 24 hours prior to test)
5. Release on-off tool & circ pkr fluid.
6. POOH w/injection tbg & lay down.

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

Signed [signature] Title Sr. Conservation Coordinator Date 03-31-92

(This space for Federal or State office use)

Approved by _____ Title _____ Date 4-1-92

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