BUREAU OF LAND MANAGEMENT     Expires: March 31, 1893       SUNDRY NOTICES AND REPORTS ON WELLS     5. Lease Designation and Senal No.       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     6. If Indam, Allotes of Tribe Name       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     7. If Unit or CX. Agreement Designation       SUBMIT IN TRIPLICATE       Type of Well       X_ Out     Gas     INJECTION       Well     Other     8. V       Address and relephone ric.     9. J       CONCOC, INC.       Address and relephone ric.     30 025 23706       10 Desta Dr., Suite IDOW, Midland, Texas 79705-4500,915 686-5424       Disc 20, TI7S, R32E, Unit Letter P       Surface: TS FeL (205' FEL TD:       Sec 20, TI7S, R32E, Unit Letter P       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION       TYPE OF SUBMISSION       TYPE OF SUBMISSION       Check APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION       TYPE OF SUBMISSION       Prestin Restruction <td< th=""><th>form 3160-5</th><th></th><th>STATES</th><th>FORM APPROVED</th></td<>	form 3160-5		STATES	FORM APPROVED
SUNDRY NOTICES AND REPORTS ON WELLS  SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to dill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT -" for such proposals  SUBMIT IN TRIPLICATE  Type of Well  Convect  SUBMIT IN TRIPLICATE  SUBMITION  SUMPCONNEC  CONVECT  Additional Series for reported to the Name  CONVECTION  SUBMITION  SUMMED  Additional Series  SUMMED  SUBMITION  SUMMED  Additional Series  SUMMED  SUBMITION  SUBMITION  SUBMITION  SUBMITION  SUBMITION  SUBMITION  SUBMITION  SUBMITION  SUMMED  Additional Series  SUMMED  SUBMITION  SUMMED  SUBMITION  SUMMED  SUBMITION  SUMMED  SUMMED  SUMMED  SUMMED  SUMMED  SUMMED  SUMMED  SUMMED  SUMMED  SUBMITION  SUMMED  SUBMITION  SUMMED  SUBMITION  SUMMED  SUBMITION  SUMMED  SUMME	(June 1990)			
SUNDRY NOTICES AND REPORTS ON WELLS       6. # Induit, Allotte or Tribe Name         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       7. # Unif of CA Agrienment Designation         If year divel       INJECTION         If Control of Decades Set. 1, K. M. or Survey Description       INJECTION         If Decade Dr., Suite 1000V, Midland, Texas 79705-4500,915 685-5424       915 684-6381       IT Country of Parsh, State         If D.       Ize Set 20, TITS, R32E, Unit Letter P       It Country of Parsh, State       Lea, NM         If Country of Parsh, State       It Country of Parsh, State       Lea, NM <td< td=""><td></td><td>BUREAU OF LAND</td><td>MANAGEMENI</td><td></td></td<>		BUREAU OF LAND	MANAGEMENI	
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.       It Unit of CA Agreement Designation         SUBMIT IN TRIPLICATE         I Type of Well         I on of use this form for proposals       It Unit of CA Agreement Designation         On of use the Well         I on of use this form for proposals       It Unit of CA Agreement Designation         One of Well         I on of use this form for proposals       It Unit of CA Agreement Designation         One of Well         I on of use this form for proposals       It Unit of CA Agreement Designation         One of Well         I one of prestore       It I one of prestore the open of the open open of the open open open open open open open ope				
Use "APPLICATION FOR PERMIT_" for such proposals       C. If Unit or CA, Agreement Designation         SUBMIT IN TRIPLICATE       C. If Unit or CA, Agreement Designation         Type of Well	Do not use this form the			6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE         Type of Well       Other:       NUECTION         Envine of Operator       WCA Unit         CNOCO, INC.       WCA Unit         CADIES AND TREPTOR       30 025 23706         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         11 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         11 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         12 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         12 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       915 684-6381         12 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 666-5424       916 674 674         13 Desta Dr., Suite 100W, Midland, Mita Midland, Texas 700W,910W,910W,910W,910W,910W,910W,910W,9	Use "APPLIC/	proposals to drill or to deepen or ATION FOR PERMIT for such p	reentry to a different reservoir. proposals	
X       Outer       INJECTION         Nume of Operator       Weil # 269         CONCCO, INC.       9.7         Address and reseptorer no.       9.7         10 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         10 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         11 Desta Dr., Suite 100W, Midland, Tevas 79705-4500,915 686-5424       915 684-6381         11 County or Parish, State       Lea, NM         20 THECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       Lea, NM         12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       New Construction         12 Subsequent Report       Change of Plans       New Construction         13 Subsequent Report       Casing Repair       Water Shu-CH         14 Modice of Infert       Abandonment       Observations Ungention         13 Describe Proposed of Completed Operations (Clearly state all periment detats, and give periment datas,		SUBMIT IN TRIF	PLICATE	7. If Unit of CA, Agreement Designation
Weil       Weil       Other       B       Weil       Other         Name of Operator       Weil # 269       WCA Unit       Weil # 269         CADRES and telephone ru       30 025 23706       10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,9/5 686-5424       915 684-5381       10 Field and Pool, or Exploratory Area         Location of Weil (Focage, Esc. T. R. M., or Suivey Description)       Maljamar Grayburg San Andres       11. County or Parsh, State         DD:       Sec 20, TI7S, R32E, Unit Letter P       11. County or Parsh, State       Lea, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION       Lea, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       Notice of Intent       Abandonment         Abundonment       Abandonment       Charge of Plans       Nec Onstruction         Subsequent Report       Plugging Back       Non-Routine Fracturing       Casing Repair       Weil Solu-Off         Subsequent Report       Dispose Water       Describer Proposed or Completed Operations (Cleanly state all pertinent details, and give pertinent date, including estimated date of stafing any proposed work. If well is directionally divided, give subsurface locations and measured and true vertical deptits for all mathems and zones pertinent date, including estimated date of stafing any proposed work. If well is directionally divided, give subsurface locatins and				
CONOCO, INC.       Well # 269         Moress and releptone rec       9.7         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500,915 686-5424       915 684-6381       10. Finici and Pool. of Exploratory Area.         Location of Well (Fodage, Sec. 1, R, M, or Survey Description)       Maljamar Grayburg San Andres       Maljamar Grayburg San Andres         Surface:       D25 FsL 21265 FsL 21265 FsL       11. County or Parish, State       Lea, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF ACTION         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         2       Notice of Intent       Abandonment         2       Subsequent Report       Plugging Back         3       Describe Proposed or Completed Operations (Clearly state all performent datas, and give performent dates, including estimated date of stating any proposed work. If well is directionally of mide, give subsurface locations and measured and true vertical depths for all markets and zones performent to this work.)*         9-II-97: MIRU - unseat pump, SION.       9-I2-97: POOH w/rods & pump, removed wellhead & installed BOP, rigged up scan-a-log & inspected tubing out of hole. Rigged down scan-a-log & started in hole w/new 2 3/8" tubing. SION.         9-I2-97: Continue to run in hole with new tubing, SN @ 4037", removed BOP, installed wellhead, RIH with pump & rods (changed out 28-3/4" rods & 20 3/4	Well Well -			
Address and releptone to:       30.025.23706         10 Desta Dr., Suite 100W, Midland, Texas 79705-4500.915 686-5424       P15 684-6381         Location of Well (Footage, Sec. T, R, M, or Survey Description)       Maljamari Grayburg San Andres         Surface:       I25 Fst. 8 Loss Fst.       II. County or Parish, State         TD:       Sec 20, TI7S, R32E, Unit Letter P       II. County or Parish, State         Leca, NM       Leca, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Subsequent Report       Abandonment         Subsequent Report       Plugging Back         Subsequent Report       Plugging Back         Final Abandonment Notice       Atenng Casing         Conversion to Injection       Conversion to Injection         3       Describe Proposed or Completed Operations (Clearly state all pernent details, and give pertinent dates, including estimated date of stating any proposed work. If well is 'directionally drilled, give subsurface locations and measured and true vertical depths for all markers end zones pertinent to this work.)''         9-II-97: MIRU - unseat pump, SION.       9-II-97: Continue to run in hole with new tubing, SN @ 4037', removed BOP, installed wellhead, RIH with pump & rods (changed out 28-34'' rods & 20 3/4'' boxes) spaced out pump & hung on.				Well # 269
10 Desta Dr., Suite 100W, Midland, Texas 78705-4500,915 686-5424       e15 884-6381       TG. Field and Pool, or Exploratory Area Malgiamar Grayburg San Andres         Location of Well (Pootage, Sec. T, R, M, or Survey Description)       If and Pool, or Exploratory Area Malgiamar Grayburg San Andres         Surface:       125 Fs.I. & 1265 FF.EL       If County or Parish, State         TD:       Sec 20, TI7S, R32E, Unit Letter P       If County or Parish, State         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Intent       Abandonment         Subsequent Report       Plugging Back         Subsequent Report       Plugging Back         Install new tubing       Depose Water         Water Shu-Coff       Conversion to Injection         Subsequent Report       Install new tubing         Electrobe Proposed or Completed Operations (Clearly state all pertinent details, including estimated date of stating 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.)*         9-II-97: MIRU - unseat pump, SION.       9-II-97: Continue to run in hole with new tubing, SN @ 4037', removed BOP, installed wellhead, RIH with pump & rods (changed out 28 - 3/4'' rods & 20 3/4'' boxes) spaced out pump & hung on.				
Surface:       I25 FSL & I285 FEL Sec 20, TI7S, R32E, Unit Letter P       I1. County or Parsh, State Lea, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Image: Index of Intent       Abandonment         Notice of Intent       Recompletion         Image: Index of Index of Intent       Recompletion         Image: Index of Index of I	10 Desta Dr., Suite 100V	V. Midland, Texas 79705-4500,915 686	5-5424 915 684-6381	10. Field and Pool, or Exploratory Area
TD:       Sec 20, TI7S, R32E, Unit Letter P       Lea, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION				
2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Intent       Abandonment         Subsequent Report       Plugging Back         Final Abandonment Notice       Atering Casing         Install new tubing       Outre of Intent         Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Report       Casing Repair         Image: Subsequent Report       Image: Cas				11. County or Parish, State
TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Intent       Abandonment       Change of Plans         Subsequent Report       Plugging Back       Non-Routine Fracturing         Subsequent Report       Plugging Back       Non-Routine Fracturing         Final Abandonment Notice       Atening Casing       Conversion to Injection         Vater Shut-Off       Atening Casing       Conversion to Injection         Vater Shut-Off       Atening Casing       Conversion to Injection         Vater Shut-Off       Vater Shut-Off       Object Report ratio to prise copilation on Well Completed Operations (Clearly state all performent details, and give performent dates, including estimated date of starting any proposed work. If well is directionally dniled, give subsurface locations and measured and true vertical depths for all markers and zones perforent to this work.)*         9-II-97: MIRU - unseat pump, SION.       9-I2-97: POOH w/rods & pump, removed wellhead & installed BOP, rigged up scan-a-log & inspected tubing out of hole. Rigged down scan-a-log & started in hole w/new 2 3/8" tubing. SION.         9-I5-97: Continue to run in hole with new tubing, SN @ 4037', removed BOP, installed wellhead, RIH with pump & rods (changed out 29- 3/4" rods & 20 3/4" boxes) spaced out pump & hung on.			Lea, NM	
TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Intent       Abandonment       Change of Plans         Subsequent Report       Plugging Back       Non-Routine Fracturing         Subsequent Report       Plugging Back       Non-Routine Fracturing         Final Abandonment Notice       Ateming Casing       Conversion to Injection         Vater Shut-Off       Ateming Casing       Conversion to Injection         Vater Shut-Off       Ateming Casing       Conversion to Injection         Vater Shut-Off       Vater Shut-Off       Objects Water         Vater Shut-Off       Objects Proposed or Completed Operations (Clearly state all performent details; and give performent 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 perforent to this work.)*         9-II-97: MIRU - unseat pump, SION.       9-I2-97: POOH w/rods & pump, removed wellhead & installed BOP, rigged up scan-a-log & inspected tubing out of hole. Rigged down scan-a-log & started in hole w/new 2 3/8" tubing. SION.         9-I5-97: Continue to run in hole with new tubing, SN @ 4037', removed BOP, installed wellhead, RIH with pump & rods (changed out 29- 3/4" rods & 20 3/4" boxes) spaced out pump & hung on.	2 CHECK APPRO	PRIATE BOX(s) TO INDICATE	NATURE OF NOTICE, REPOR	T, OR OTHER DATA
Subsequent Report     Recompletion     New Construction     New Con		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
<ul> <li>Subsequent Report</li> <li>Recompletion</li> <li>New Construction</li> <li>Non-Routine Fracturing</li> <li>Casing Repair</li> <li>Vater Shut-Off</li> <li>Conversion to Injection</li> <li>Altering Casing</li> <li>Conversion to Injection</li> <li>Vater Shut-Off</li> <li>Conversion to Injection</li> <li>Vater Shut-Off</li> <li>Altering Casing</li> <li>Conversion to Injection</li> <li>Vater Shut-Off</li> <li>Conversion to Injection on Well Isi</li> <li>P-II-97: MIRU - unseat pump, SION.</li> <li>9-I2-97: POOH w/rods &amp; pump, removed wellhead &amp; installed BOP, rigged up scan-a-log &amp; inspected tubing out of hole. Rigged down scan-a-log &amp; started in hole w/new 2 3/8" tubing. SION.</li> <li>9-I5-97: Continue to run in hole wit</li></ul>	Notice of Int	ent		
Casing Repair Casing Repair Casing Repair Casing Repair Casing Repair Conversion to Injection Conversion Conversion to Injection Conversion Con			Recompletion	
<ul> <li>Final Abandonment Notice</li> <li>Attering Casing</li> <li>Install new tubing</li> <li>Dispose Water</li> <li>Note: Report reads of multiple completion on Well</li> <li>Competition or Recompletion or Recom</li></ul>	X Subsequent	Report	Plugging Back	Non-Routine Fracturing
<ul> <li>X Install new tubing Dispose Water</li> <li>Dispose Water&lt;</li></ul>			Casing Repair	Water Shut-Off
<ul> <li>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.)*</li> <li>9-II-97: MIRU - unseat pump, SION.</li> <li>9-I2-97: POOH w/rods &amp; pump, removed wellhead &amp; installed BOP, rigged up scan-a-log &amp; inspected tubing out of hole. Rigged down scan-a-log &amp; started in hole w/new 2 3/8" tubing. SION.</li> <li>9-I5-97: Continue to run in hole with new tubing, SN @ 4037', removed BOP, installed wellhead, RIH with pump &amp; rods (changed out 29- 3/4" rods &amp; 20 3/4" boxes) spaced out pump &amp; hung on.</li> </ul>	Final Aband	onment Notice	Altering Casing	Conversion to Injection
<ul> <li>3. 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.)*</li> <li>9-II-97: MIRU - unseat pump, SION.</li> <li>9-I2-97: POOH w/rods &amp; pump, removed wellhead &amp; installed BOP, rigged up scan-a-log &amp; inspected tubing out of hole. Rigged down scan-a-log &amp; started in hole w/new 2 3/8" tubing. SION.</li> <li>9-I5-97: Continue to run in hole with new tubing, SN @ 4037', removed BOP, installed wellhead, RIH with pump &amp; rods (changed out 29- 3/4" rods &amp; 20 3/4" boxes) spaced out pump &amp; hung on.</li> </ul>			X Install new tubing	
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with pump & rods (changed out 29- 3/4" rods & 20 3/4" boxes) spaced out pump & hung on.				
	with pum	p & rods (changed out 29- 3/4	rods & 20 3/4" boxes) spaced or	
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	4. I hereby certify that the forego			
1. Thereby certify that the foregoing is true and correct	Main			
	(This space for Federal or State			Date 1-27-98
		,		
Signed Mu Fuche Title Ann E. Ritchie REGULATORY AGENT Date 1-27-98	Approved by Conditions of approval, if any:	Title		Date
Signed     Multiplication     Ann E. Ritchie       (This space for Federal or State office use)     Title     REGULATORY AGENT     Date 1-27-98	itie 18 U.S.C. Section 1001, mak	es it a crime for any person knowingly and wil	ifully to make to any department or agency of the	United States any false, fictitious or fraudulent
Signed     Multiplication     Ann E. Ritchie       (This space for Federal or State office use)     Title     REGULATORY AGENT     Date 1-27-98		o any matter within its jurisdiction.		
Signed       Multiplication       Ann E. Ritchie REGULATORY AGENT       Date 1-27-98         (This space for Federal or State office use)       Title       Title       Date 1-27-98         Approved by       Title       Date       Date         Conditions of approval, if any.       Title       Date       Date         It is 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 latements or representations as to any matter within its jurisdiction.	NST: BLM(5) NMOCD(1)	*See	e Instruction on Reverse Side	
Signed       Multiplication       Ann E. Ritchie REGULATORY AGENT       Date       1-27-98         (This space for Federal or State office use)       Title				

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