

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

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 Dr. Ste 100W, Midland, TX 79705

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter "G", 2615' FNL & 1345' FEL
Sec. 30, T-17S, R-32E

5. Lease Designation and Serial No.

LC 029410 B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. Bty 1
MCA Unit No. 278

9. API Well No.
3002523930

10. Field and Pool, or Exploratory Area
Maljamar Grayburg 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 Csq Integrity Test
☐ 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.)

It is proposed to perform the following operations in order to prepare this well for temporary abandonment:

1. Pull out of hole with rods & tbq, tag well for fill.
2. Run in hole w/bit & scraper to 3710'.
3. Set 5-1/2" 14# RBP with equalizing valve at 3700'.
4. Test to 500 PSIG for 30 mins. (Contact Hobbs BLM office 24 hours prior to test).
5. Circ well with pkr fluid.

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 [Signature] Title PERSONNEL MANAGER Date 4-8-92

Conditions of approval, if any: