

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

Budget Bureau No. 1004-1
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME <i>MCA Unit Bly 3</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR <i>P.O. Box 460 - Hobbs, NM 88240</i>	9. WELL NO. <i>#307</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>Unit letter A 199/N + 1270/E</i>	10. FIELD AND POOL OR WILDCAT <i>Majamar G-SA</i>
14. PERMIT NO. <i>30-025-24058</i>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 27, T17S, R32E</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <i>Clean Out, Perf., Acidize, Frac.</i> ☒	
(Other) ☐		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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.)*

9-1-89 Drilled out junk iron from 4061' to 4078'. D.O. metal + cmt. from 4078' to 4120' (P&TD). Perf. w/1 JSF: 3830, 44, 48, 56, 65, 74, 82, 94, 3908, 4025, 56, 74, 81, 82 + 4083 (16 perfs). Acidize 7th zone perfs (3994-4083) w/40 Bbl 15% HCL-NE-FE acid. Frac the MGSA 6th + 7th zones in 2 stages w/27,000# 16/30 sand. Swab back + run prod. equip.

RECEIVED
OCT 2 9 05 AM '89
CASH
AREA

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

SIGNED *W.W. Baker* W.W. Baker TITLE *Administrative Supr.* DATE *Sept. 26, 1989*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: *Adm*

*See Instructions on Reverse Side