

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
(Other instructive
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DATE
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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

RECEIVED

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 ☐	2. NAME OF OPERATOR Conoco Inc.	3. ADDRESS OF OPERATOR P.O. Box 460 - Hobbs, New Mexico 88240	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1295' FNL & 75' FWL - Unit Letter D	5. LEASE DESIGNATION AND SERIAL NO. LC-057210	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME MCA Unit	8. FARM OR LEASE NAME MCA Unit Bty3	9. WELL NO. 317	10. FIELD AND POOL, OR WILDCAT Maljamar G-SA	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-17S-32E	12. COUNTY OR PARISH Lea	13. STATE NM
14. PERMIT NO. 30-025-24186	15. ELEVATIONS (Show whether DF, RT, GR, etc.)											

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETION ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☒ Cased Hole Stimulation	

(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.)

Work started 12/15/88. MIRU. POOH w/ rods & pump. Run scraper to 4170'. Perf 6th zone 3803'-3869'. Perf 7th zone 3882'-4027'. Perf 9th zone 4055'-4125'. Acidize w/ 2 blocks, 15 bbls acid & 20 bbls acid. Recover load. G1H w/ Hg at 4123'. Run pump & rods. Place well on production. Work completed 12/20/88.

ACCEPTED FOR RECORD

JAN 26 1989

EB

CARLSBAD, NEW MEXICO

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

SIGNED W. J. Finney DE FINNEY TITLE Administrative Supervisor

DATE January 16, 1989

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side