

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OIL CONS. COM. ON
P. O. BOX 1900
HOBBS, NEW MEXICO 88240

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)
2615' FSL & 1345' FEL
Sec. 27, T-17S, R-32E *Unit 8*

5. Lease Designation and Serial No.

LC 057210

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. *Step 2*
MCA Unit No. 329

9. API Well No.
3002524275

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

11. County or Parish, State

Lea, NM

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 Repair Casing Leak
☐ 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 data, 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 on the MCA Unit No. 329 well:

1. Shut in offset CO2 injection wells Nos. 145 & 184.
2. GIH w/RBP & pkr and isolate casing leak.
3. Set RBP 100' below casing leak.
4. Set retainer 150' above casing leak.
5. Squeeze casing leak - type and volume of cement depends on location of leak.
6. Drill out ret.
7. Return to production.

Verbal approval to proceed with this work was given by Shannon Shaw per 8/27/92 telephone conversation.

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

Signed

Joseph M. Brown Title Sr. Conservation Coordinator Date 08-27-92

(This space for Federal or State office use)

Approved by

Title _____ Date 9/16/92

Conditions of approval, if any:

RECEIVED

SEP 17 1992

OCD HOBBS OFFICE