

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC 0586990

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. *Blk 3*
MCA Unit No. 350

9. API Well No. *1*
3002524546

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

11. County or Parish, State
Lea, NM

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 Injector

2. Name of Operator
Conoco, Inc.

3. Address and Telephone No.
10 Dista Dr. Ste 100W, Midland, TX 79705

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2615' FSL & 1295' FWL
Sec. 26, T-17S, R-32E

12. 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	☐ Recompletion
☐ Final Abandonment Notice	☐ Plugging Back
	☐ Casing Repair
	☐ Alarming Casing
	☒ Other Casing 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.)

TEST CASING

It is proposed to temporarily abandon the MCA Unit No. 350 as follows:

- Contact the NMOCD at least 24 hrs before beginning procedure.
- Fill annulus with fluid if necessary, & connect a pressure chart to the 5-1/2 X 2-3/8" annulus. Put 500 PSIG on well annulus for 30 min to perform test.

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

Signed *[Signature]* Title Sr. Conservation Coordinator Date 09-21-92

(This space for Federal or State office use)

Approved by _____ Title _____ Date 10/1/92

Conditions of approval, if any:

Title 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 statements or representations as to any matter within its jurisdiction.