

STATES OF NEW MEXICO
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

DATE
n re

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-029405(B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface Unit I

14. PERMIT NO.
2442' FSL & 432' FEL
30-025-27065

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit Bty 2

9. WELL NO.

362

10. FIELD AND POOL, OR WILDCAT

Maljamar 6/SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 20-17S-32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

temporary abandon

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.)*

- ① MIRU on 8-13-86. POOH w/ rods & pump.
- ② Run scraper to 3700'. POOH w/ pkr @ 3896'. Set cmt retainer @ 3891'.
- ③ Pumped 45 sxs class "C". Spotted 4" cap on top of retainer.
- ④ Spotted 105 sxs across perts from 3891'-3854'. Pressure up on cmt to 500 psi. WOC for 24 hrs.
- ⑤ Tag TOC @ 3529'. Set CIBP @ 3514'. Tested CIBP to 500 psi, hld.
- ⑥ Circ. well w/ pkr fluid. Rig down on 8-22-86.

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

SIGNED

TITLE

Administrative Supervisor

DATE

9-10-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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.

BLM-Carlsbad(6) AR CO(2) Cities(1) PLCC(1) File

ACCEPTED FOR RECORD
OCT 02 1986

NEW MEXICO
CARLSBAD

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RECEIVED
OCT 6 1986
C.C.C.
HOES OFFICE