

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions
verse side)

Form approved.
Budget Bureau No. 1004-0135
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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. <i>LC-059001</i>
2. NAME OF OPERATOR <i>Conoco Inc.</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>P.O. Box 460 Hobbs, N.M. 88240</i>		7. UNIT AGREEMENT NAME <i>MCA</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>Unit G</i> <i>1425' JNL + 1462' JEL</i>		8. FARM OR LEASE NAME <i>MCA Unit</i>
14. PERMIT NO. <i>30-025-29852</i>		9. WELL NO. <i>370</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3935' GL</i>		10. FIELD AND POOL, OR WILDCAT <i>Malpman 8/8A</i>
		11. SEC. T., E., M., OR BLK. AND SURVEY OR AREA <i>Sec. 33-178-32E</i>
		12. COUNTY OR PARISH <i>Lea</i>
		13. STATE <i>NM</i>

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 COMPLETE

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) *Set Surface Casing*
(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.)

Run 13 7/8" Surface Casing. Shoe at 403'. Cement lead slurry of 200 SXS class C Cement w/4% gel. Tail slurry of 150 SXS class C w/2% CAC/2, 47 SXS Cmt returns, bumped plug, float held. WUC.

ACCEPTED FOR RECORD

CARLSBAD, NEW MEXICO

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side