	UN' DESTATES INTERICAL OF LAND MANAGEMENT		5. LEASE DESIGNATION AND SERIAL NO. LC - 02 9509 (A)
	TICES AND REPORTS O		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS.	AU	G 11 Z 52 111 00	7. UNIT AGREEMENT NAME
WELL WELL OTHER 2. NAME OF OPERATOR		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	8. FARM OR LEASE NAME
Conoco Inc.		ricas	Baish A
3. ADDRESS OF OPERATOR P.O.Box 460	Hobbs um 88:	240	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT
At surface			Maliamar Abo/Baish Wolfe
810' FNL + 500'	FWL Unit	D	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
			Sec. 22-175-328
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, I	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
<u> 30-025-30363</u>	4006 GL		Lea Nm
16. Check A	ppropriate Box To Indicate Na	iture of Notice, Report, or (Other Data
NOTICE OF INTENTION TO:			UENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	BEPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
REPAIR WELL	ABANDON®	(Other) Set Drod.	Casing
(Other)		(NOTE: Report result	s of multiple completion on Well pletion Report and Log form.)
proposed work. If well is directinent to this work.) •	ionally drilled, give subsurface location	details, and give pertinent dates ins and measured and true vertic	, including estimated date of starting any all depths for all markers and zones perti-
Ran 48 its of	1", 26#, L-80 (LT+0	:); 95 jts of	7", 23#, L-80 (LTic);
and 73 its	of 7", 26#, K-55	(cT+c) production	n casing and set
@ 10,000°.	Cemented w/ 62	5 sxs Class "H	d" and had
10 5x5 r	eturns.		
			t
			recteel report
		, ah	re C
		a Color	
		ρ	
		J	
ΩI			
18. I hereby certify that the foregoing	is true and correct		
SIGNED A	D.F. Finney TITLE Adw	. Supervisor	DATE 5/15/88
(This space for Federal or State out		<u> </u>	
APPROVED BYCONDITIONS OF APPROVAL, IF			DATE
· · · ·			

*See Instructions on Reverse Side

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