

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(other instructions on re-
verse side)

Form 3100-5, No. 1004-1
Adopted August 31, 1988
1. LEASE DESIGNATION AND SERIAL NO.
LC-058697B
2. 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.
See "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ <i>Injection</i>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Conoco Inc.</i>	8. FARM OR LEASE NAME <i>Pearl B</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 460 - Hobbs, NM 88240</i>	9. WELL NO. <i>#3</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>Unit better N 685 feet from S line and 2050 feet from the west line</i>	10. FIELD AND POOL, OR WILDCAT <i>Malpais G-5A</i>
14. PERMIT NO. <i>30-025-08338</i>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 30, T-17S, R-33E</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <i>Temporary Abandonment</i> ☒	

(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.)*

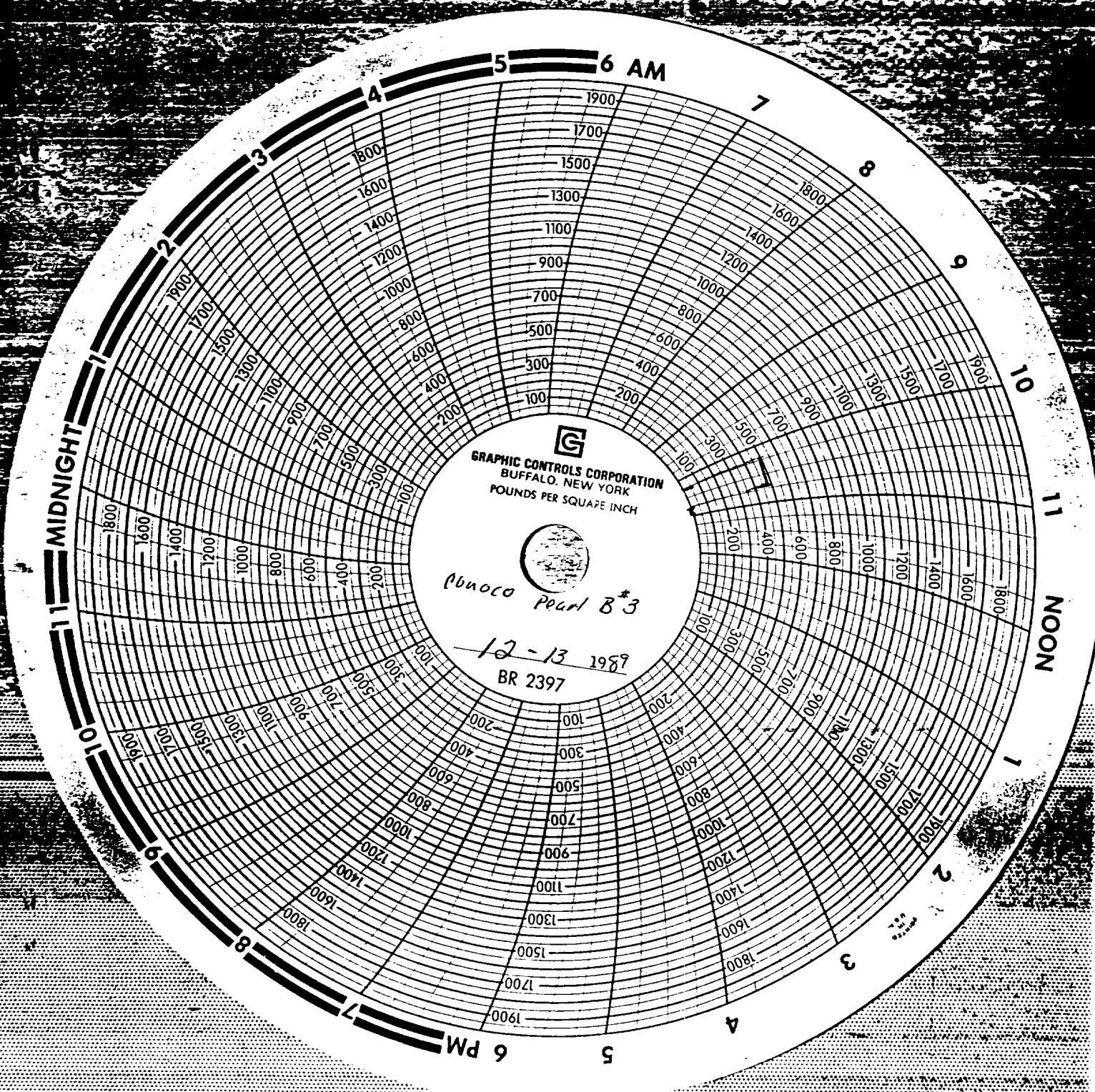
12-11-89 Set CIBP @ 3870'; circulate w/10# brine & pkrs. fluid. Test to 500# for 15 min. See attached chart.

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DEC 23 11 25 AM '89

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

SIGNED <i>W.W. Baker</i> <i>W.W. Baker</i>	TITLE <i>Adm. Supervisor</i>	DATE <i>Dec. 22, 1989</i>
(This space for Federal or State office use) Orig. Signer		
APPROVED BY	TITLE <i>PETROLEUM ENGINEER</i>	DATE <i>1-5-90</i>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side



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