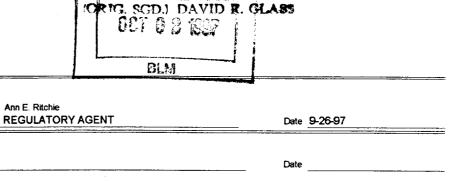
Oil C Form 3160-5 UNITED STATES FORM APPROVED NM 88 (June 1990) DEPARTMENT OF THE INTERIOR Budget Bureau No. 1004-0135 **BUREAU OF LAND MANAGEMENT** Expires: March 31, 1993 5. Lease Designation and Serial No. LC 03|622A **SUNDRY NOTICES AND REPORTS ON WELLS** 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT -" for such proposals 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE 1. Type of Well X Oil Well 2. Name of Operator Klein Federal Well #1 CONOCO, INC 9. API Well No. 3. Address and Telephone No. 30 025 3376 10 Desta Dr., Suite IOOW, Midland, TX 79705-4500, 9l5 686-5424 or 10 Field 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Devonian Surface: 23/0 FSL & 1650 FEL 11. County or Parish, State Sec II, T20S, R36E Location: TD: Same Lea County, NM CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Intent Abandonment Change of Plans Recompletion **New Construction** Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Final Abandonment Notice Altering Casing Conversion to Injection Other: Add perfs/set plug Dispose Water 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.)* 4-II-97: Acidized Devonian w/3500 gals I5% HCL, flush w/2% KCL, flow well to tank, recovered water. 4-I4-97: Rig up swab, recovered water. 4-I5-97 through 4-I8-97: Swabbing; tubing set @ 8579'.



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.

Title

Title

Approved by Conditions of approval, if any

14. I hereby certify that the

(This space for Federal or State office use