Form 3160-5 (June 1990)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N M Oil Co 1980

Hobbs NM 88241

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993
5. Lease Designation and Senal No.

NM 025/20- VM-25/2

6 If Indian, Allottee of Tribe Name

## SUNDRY NOTICES AND REPORTS ON WELLS

SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
Type of Well		
X Oil Gas INJECTION		
Well Other  2. Name of Operator		SEMU Permian
CONOCO, INC.		Well #43 9. API Well No.
Address and Telephone No.		
10 Desta Dr., Suite IOOW, Midland, TX 79705-4	4500. 9/5 686-5424 or 9/5 684-638/	30 025 06085
Location of Well (Footage, Sec., T., R., M., or Survey De	escription)	Skaggs Grayburg
Surface: I980 FSL & 660 FWL		11. County or Parish, State
Location: Sec i3, T20S, R37E  TD: Same		Lea County, NM
TD. Same		Lea County, 1444
CHECK APPROPRIATE BOX(s) T	O INDICATE NATURE OF NOTICE, REPOR	T, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACT	TION
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	X Other: Frac Job	Dispose Water (Note: Report results of multiple completion on Well
Describe Proposed or Completed Operations (Clearly s directionally drilled, give subsurface locations and n	state all pertinent details, and give pertinent dates, including estimates and true vertical depths for all markers and zones pertinent	Completion or Recompletion Report and Log form.) ated date of starting any proposed work. If well is
7-30-97: Pull rods & pump, lay down 7-31-97: Circulate clean. 8-1-97: Ran treating packer in hole, t 8-4-97: Frac Grayburg w/24,000 gal 8-5-97: Tag sand and clean out sand 8-6-97: Go in hole with production to Well put on production.	n prod. tubing.  test to 6000#, set packer @ 3838', load backsils SFG 4000, ramping 75,000# I6/30 SLC. d to 389l'.  ubing, land tubing w/SN @ 379l' go in hole with	Completion or Recompletion Report and Log form.) ated date of starting any proposed work. If well is ent to this work.)*
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