

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0133
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Designation and Serial No.

LC-032096A

6. If Indian, Alutian or Tribe Name

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

CONOCO INC.

3. Address and Telephone No.

10 DESTA DRIVE, STE 100 W, MIDLAND, TX 79705 (915) 686-5494

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980 N + 660 E

Unit letter H, Sect. 27 T21S R37E

8. Well Name and No.

Lockhart A-27 No. 11

9. API Well No.

30-025-06797

10. Field and Pool, or Exploratory Area

Drinkard

11. County or Parish, State

Lea, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Lease

☒ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other Swab to flow

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

(Note: Report results of multiple completions on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent data, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface location and measured and true vertical depths for all markers and zones pertinent to this work.)

7-17-91 RU. Blindbry. Open TP-30# CP 150# FFL at 3900'. Made 6 runs. Swabbed back 4 BO - 3 BW - tbg was dry closing TP 55# CP 85#. Drinkard - Open TP-35 FFL 5400. Made 8 runs swabbed back 3 BO + 10 BW. Left tbg w/approx 150' cut fluid. Closing TP 50# well flowing to battery, RD.

ACCEPTED FOR RECORD

DEC 2 1991

CARLSBAD NEW MEXICO

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

Signed

Christina Neff

Title ADMIN. ASSISTANT

Date 11-14-91

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date