OCN - Hobbs

Form 3 160-5 (June 1990)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 3 1, 1993

BUREAU OF	LAND MANAGEMENT		esignation and Serial No.	
		J. Lease D		
SUNDRY NOTICES AND REPORTS ON WELLS		6 161 1	LC 032096A	
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		6. If India	n, Allottee or Tribe Name	
Use "APPLICATION FO	DR PERMIT—" for such proposals			
SUBMIT IN TRIPLICA TE		7. If Unit o	or CA, Agreement Designation	
1. Type of Well	THE FIRST PLEASE TE	_		
Oil Gas Other		8. Well Nan	ne and No	
2. Name of Operator			Lockhart A-27 #8	
Conoco Inc  3. Address and Telephone No.		9. API Well		
10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580			30-025-06805	
4. Location of Well (Footage. Sec., T. R. M. or Survey Description)		10. Field an	10. Field and Pool, or Exploratory Area	
		11. County	Paddock or Parish, State	
810' FNL & 660' FWL, Sec. 27, T21S, R37E, D				
			Lea, NM	
TIN CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPOR	RT, OR O	THER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION			
Notice of Intent	Abandonment			
	Recompletion	$\Box$	e of Plans Construction	
Subsequent Report	Plugging Back		outine Fracturing	
	Casing Repair		Shut-Off	
Final Abandonment Notice	Altering Casing	Conve	rsion to Injection	
	Other Renew TA Status	1 1	se Water	
		Note: Report	results of multiple completion on Well or Recompletion Report and Log form.)	
We wish to retain this wellbore for further eva	ary Abandonment status for the above referenced well. A			
completed within the next 12-18 months.	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
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	TH Approved For 12 Month Period 9			
	// The state of th		# (**) #**********************************	
	Ending 10/14/2001		4.4 2.7%	
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4. I hereby certify that the foregoing is true and correct		. '		
Reaso William	Reesa R. Wilkes		10/5/00	
(This space for Federal or State office use)	Title Sr. Staff Regulatory Assistant	Date	10/5/00	
Approved by Conditions of approval if any:	LARA Title Potrolown Engineer	Date	10/26/2000	
RIMAN NIMOCOAN CUEAR RONGA COCTACOT			•	
BLM(0), NIMOCD(1), SHEAR, PUNCA, CUST ASST,	FILE ROOM, FIELD		,	
BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, Title 18 U.S.C. Section 1001, makes it a crime for any person kr or representations as to any matter within its jurisdiction.	FILE ROOM, FIELD nowingly and willfully to make to any department or agency of the United St	tates any false, i	ictitious or fraudulent statements	

