

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Conoco Inc.	8. FARM OR LEASE NAME Lockhart A-35
3. ADDRESS OF OPERATOR P.O. Box 460 - Hobbs, New Mexico 88240	9. WELL NO. No. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 1980' FWL - Unit Letter C	10. FIELD AND POOL, OR WILDCAT NMEU / Blindburg O & E Cas 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 35-215-37E
14. PERMIT NO. 30-025-07032	12. COUNTY OR PARISH Lea
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) <u>Downhole Commencement</u> ☒	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☐	

(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.)*

1. POOH w/ Hbg strings
2. Drill out model "D" pku at 5920'.
3. Retrieve RBP at 6330'.
4. Drill out model "D" pku at 6330'.
5. Acidize Drinkard, Tubb & Blindburg 3 ones w/ 50 bbls each 75% 15% HCL - 25% Xylene.
6. Run 2 3/8" Hbg to 6495'.
7. Run rods
8. Place on production

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JAN 22 12 25 PM '88
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18. I hereby certify that the foregoing is true and correct

SIGNED [Signature]

TITLE Administrative Supervisor

DATE January 20, 1988

(This space for signature of State office use)

APPROVAL

TITLE

DATE 2-2-88

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Title 18 USC 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.

BLM-Cas. Lab. 1/23 ARCD(2) AMCD(2) Chairman(1) Tel.

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HOBBS OFFICE