

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE MANNER
(Other instructions on re-
verse side)

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 ☐	5. LEASE DESIGNATION AND SERIAL NO. LC-031670A
2. NAME OF OPERATOR Conoco Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 460 - Hobbs, New Mexico 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWH - Unit Letter L	8. FARM OR LEASE NAME SEMIL Permian
	9. WELL NO. 15
	10. FIELD AND POOL, OR WILDCAT N.M. Strange Canyon
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-20S-38E
14. PERMIT NO. 30-025-07310	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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)

Work started 8/11/87. MIRA. Mix 2 drums of V4988 & 1 gal 1111 in 20 bbls of 2% KCL water. Add 1/2 gal ODS-480 & mix. Pump mixture & 250 bbls 2% KCL water, 4 BPM at maximum pressure 2100 psi. Bled well down to pit. Release pit & POOH. Run producing equipment & place on production.

SJS

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

SIGNED

DE FINNEY

TITLE

Administrative Supervisor

DATE

November 24, 1987

(This space for Federal or State office use)

APPROVAL

COMMENTS OF APPROVAL, IF ANY:

TITLE

DATE

*See instructions on Reverse Side

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-Caledon (6) APPD (2) AMOCO (2) Chairman (1) L. D.