

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
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

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other Injection Well

2. Name of Operator

Conoco Inc

3. Address and Telephone No.

10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580

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

660' FNL & 1980' FWL, Sec. 19, T20S, R38E, C

5. Lease Designation and Serial No.

LC 031696A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

SEMU Permian #31

9. API Well No.

30-025-07817

10. Field and Pool, or Exploratory Area

Skaggs Grayburg

11. County or Parish, State

Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent

☒ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other Repaired Tubing Leak

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

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

13. 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.)\*

8/3/00 MIRU NDWH NU & tested BOP. Released packer. POOH scanning tubing. Found hole in joint #86. Joint was selected (31% wall loss).

8/4/00 RIH w/injection equipment hydrotesting tubing. No leaks. Circulated packer fluid. Set packer @ 3528' +/- NDBOP NUWH Ran CIT, 300 psi for 30 minutes (see chart attached). RDMO

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

Signed

Reesa Wilkes

Title

Reesa R. Wilkes

Sr. Staff Regulatory Assistant

Date

8/17/00

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval if any:

BLM(6), NMOCD(3), SHEAR, PONCA, COST ASST, FILE ROOM, FIELD

Title 18 U.S.C. 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.

\*See Instruction on Reverse Side



