Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC 031670B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA. Agreement Designation

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other **INJECTION**

2. Name of Operator
Conoco Inc.

3. Address and Telephone No.
10 Desta Drive STE 100W, Midland, TX 79705   (915)386-5424

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

1880′ FSL & 1980′ FWL, SEC. 20, T-20S, R-38E, UNIT LTR ′K′

8. Well Name and No.
SEMU MCKEE NO. 62

9. API Well No.
30-025-07835

10. Field and Pool, or Exploratory Area
WARREN MCKEE

11. County or Parish, State
LEA, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
	☐ Recompletion	☐ New Construction
☒ Subsequent Report	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
☐ Final Abandonment Notice	☐ Altering Casing	☐ Conversion to Injection
	☒ Other REPAIR COMMUNICATION	☐ 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.)*

9-28-92 MIRU. POOH W/ INJECTION EQUIP. REPLACE 3 JTS TBG.
RIH W/ 5 1/2″ LOCK SET PKR SET @ 8827′ & TBG. PUMPED PKR. FLUID AND TEST CSG TO
500# FOR 30 MIN. – HELD.
RDMO.

WELL RETURNED TO INJECTION ON 9-30-92.
INJECTING 650 BWPD AT 1400#.

NMOCD NOTIFIED, DID NOT WITNESS TEST. CHART ATTACHED.

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

Signed _____   Title ____SR. REGULATORY SPEC____   Date __10-12-92__

(This space for Federal or State office use)

Approved by _____   Title _____   Date _____
Conditions of approval, if any:

*See Instruction on Reverse Side
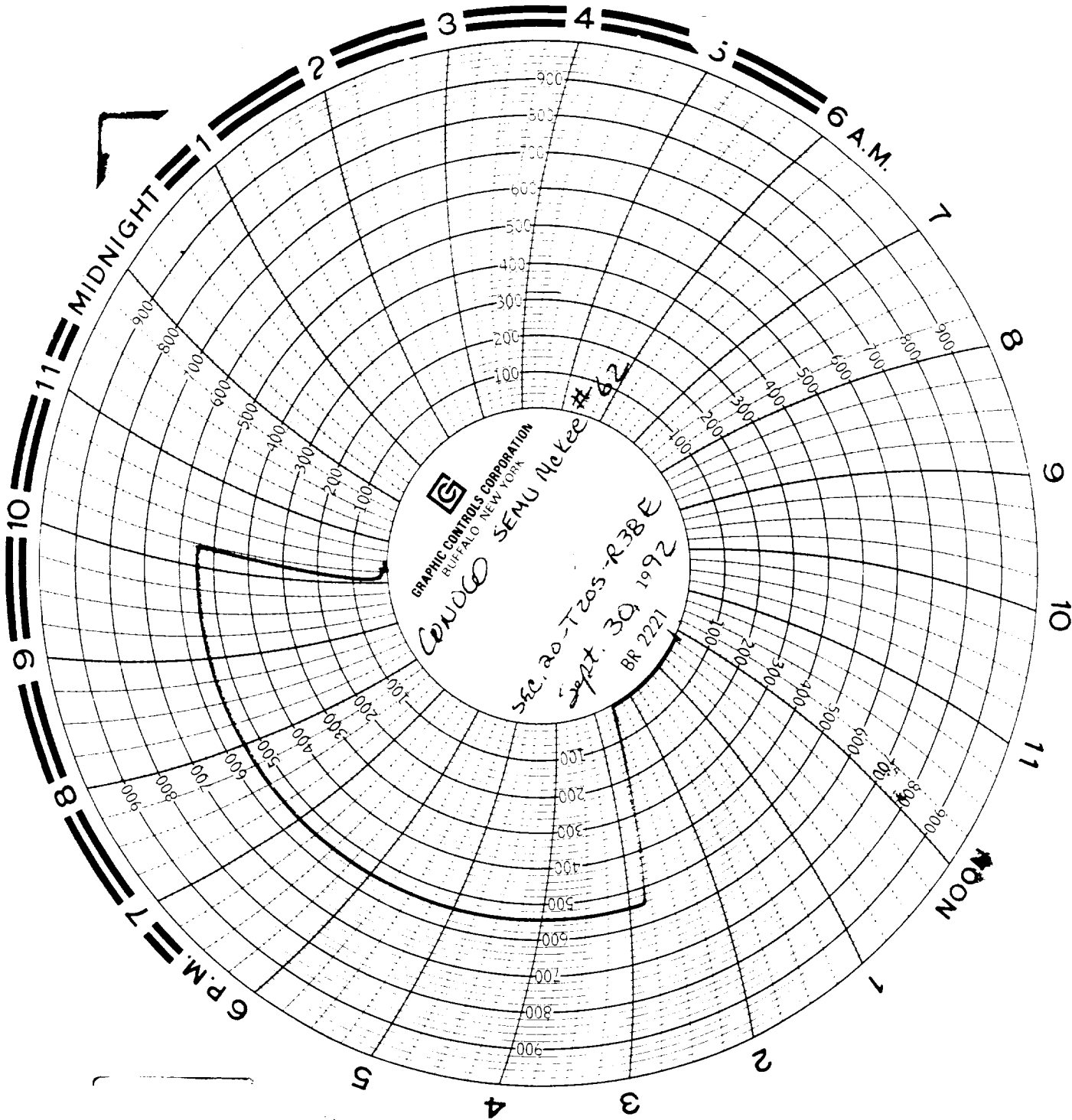
GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK

CENUO SEMU Mckee #62

SEC. 20-T205-R38E

Sept. 30, 1992

BR 2221

MIDNIGHT

6 A.M.

6 P.M.

NOON