Form 3 160-5 (June 1990)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

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

LC 031695B

5 Lease Designation and Seriai No.

Water Shut-Off Conversion to Injection

Dispose Water

!Note: Reponresuitsof multiplecompitiononWdl

CHMIDA	NOTICES	VVID	REPORTS		
JUNDEL	NOTICES	AND	REFURIA	CHA CALL	

Do not use this form for proposals to dri Use "APPLICATION FO	6 If Indian, Allonee or Tribe Name		
SUBMIT	7 If Unit or CA, Agreement Designation		
1 Type of Well		-	
Well Gas Other	8 Well Name and No.		
2 Name of Operator CONOCO INC	Warren Unit, Well # 6		
CONOCO INC.	9. API Well No.		
Address and Telephone No.	30-025-07853		
10 DESTA DR. STE. 100W, MIDLAND	10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T. R. M. or Survey De-	Warren McKee Simpson		
660' FSL & 1980' FWL,	11 County or Parish, State		
		Lea, NM	
CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION		
Notice of Intent	Aban Jonment	Change of Plans	
Subsequent Repon	Recompletion Plugging Back	New Construction Non-Routine Fractunng	

Casing Repair

Renew TA Status

Conoco requests renewal approval of the Temporary Abandon status for the above listed well. A valid MIT was run on 12-4-96 and should be on file with your office.

We desire to retain this wellbore while we evaluate for possible uphole potential. This evaluation should be completed within the next 12 to 18 months.

	india.	Jan 19 man Samuel		otte va €,	
14. I hereby certific that the foregoing is true and correct	Bill R. K	eathly			
Signer Dell K. Searthy	Title Sr. Regu	latory Specialist	Date1-15-99		
(This space for Federai or State office use)		V			
Approved by	Title		Date		
BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FIL	E ROOM				
Title 18 U.S.C. Section 1001, makes it a crime for any person know	ingly and willfully to make	to any department or agency of the United State	es any false, ficti	tious or fraudulent stater	

\*See Instruction on Reverse Side

or representations as to any matter within its junsdiction

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 )\*

