

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

2. Name of Operator

CONOCO INC.

3. Address and Telephone No.

10 DESTA DRIVE, STE 100 W, MIDLAND, TX 79705 (915) 686-5494

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

1980 FNL + 660 FEL, Letter H, Sect. 20, T20S, R38E

5. Lease Designation and Serial No.

LC-0316708

6. If Indian, Allotment or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Burger B-20 No. 3

9. API Well No.

30-025-26586

10. Field and Pool, or Exploratory Area

Blinchbury/Warren Subb

11. County or Parish, State

Lew, NM

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 Acidize
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent data, 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.)*

7-2-91 MRLU. Unset pmp. R/H w/bit + scraper to 6035. R/H w/pkr tstg. tbg. Set pkr at 5830. Load + PT annulus to 500 psi. Acidize Blinchbury perf w/1275 gal 95% NEFE HCL w/425 gal Pentol 250 + 30 1/1 sp gr. ball sealers at 2-3 BPM. BDP 3060 AVG 4200 max 4500 good ball action ISIP 3000 5 msl 2600 10 msl 2400 15 msl 2200. Left SI 24 hrs for pressure to bleed off. Rel pkr.

AC

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

Signed Christine J. Neff

Title ADMIN. ASSISTANT

Date 9-16-91

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

RECEIVED

OCT 21 1991

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HOBBS OFFICE