Form 3 160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

01/18/00

DIDEALIOE	LAND MANAGEMENT	Expires: March 3 1 ,1993
		5. Lease Designation and Serial No. LC 031620A
Do not use this form for proposals to dr	AND REPORTS ON WELLS ill or to deepen or reentry to a different reservoir. OR PERMIT—" for such proposals	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICA TE		7. If Unit or CA, Agreement Designation
1. Type of Well Oil Gas Well Other		UM UM 7/04/ E 8. Well Name and No.
2. Name of Operator Conoco inc		SEMU Eumont #112
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580		9. API Well No. 30-025-26633
4. Location of Well (Footage, Sec., T. R. M. or Survey Description)		10. Field and Pool, or Exploratory Area Eumont Yates 7 Rivers Queen
600' FNL & 660' FWL, Sec. 25, T20S, R37E, D		11. County or Parish, State
<u> </u>		Lea, NM
	(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment Recompletion	Change of Plans New Construction
Subsequent Report	Plugging Back	NorRoutine Fracturing
Final Abandonment Notice	Casing Repair Altering Casing Other Renew TA Status	Water Shut-Off Conversion to Injection Dispose Water Note: Report results of multiple completion on Well
Barrier and and and are very	pertinent details, and give pertinent dates, including estimated date of starting cal depths for all markers and zones pertinent to this work.)* ary Abandonment status for the above referenced well.	
We wish to retain this wellbore while we con 12-18 months.	tinue to evaluate uphole potential. This evaluation should	d be completed within the next
	H / 12 1/27/2001	100 00 25 P 2: 25
14. I hereby certify that the foregoing is true and correct	Reesa P Wilker	

BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM, FIELD

(This space for Federal or State office use)

Approved by _______ Conditions of approval if any:

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.

Reesa R. Wilkes

Title

Title Sr. Staff Regulatory Assistant



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