

Form 3 160-5 (June 1990)

## JNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

## LC 031695A 6. If Indian, Allottee or Tribe Name

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 TRIPLICA TE  1. Type of Well Side of Well Other  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)  1980' FSL & 430' FWL, Sec. 29, T20S, R38E, L |                                  | 7. If Unit or CA, Agreement Designation   |
|--|----------------------------------|---|
|  |                                  | 8. Well Name and No.  |
|  |                                  |   |
|  |                                  | 9. API Well No.   |
|  |                                  | 30-025-27091  |
|  |                                  | 10. Field and Pool, or Exploratory Area   |
|  |                                  | Blinebry O&G  |
|  |                                  | 11. County or Parish, State   |
|  |                                  | Lea, NM   |
|  |                                  | CHECK APPROPRIATE BOX(s) TO   |
| TYPE OF SUBMISSION   | TYPE OF ACTION                   |   |
|  |                                  |   |
| Notice of Intent   | Abandonment                      | Change of Plans   |
| $\bowtie$  | Recompletion                     | New Construction Non-Routine Fracturing   |
| Subsequent Report  | Plugging Back Casing Repair      | Water Shut-Off  |
| Final Abandonment Notice   | Altering Casing                  | Conversion to Injection   |
| That Avandonnen Notes  | Other Renew TA Status            | Dispose Water   |
|  | <del></del>                      | Note: Report results of multiple completion on Well<br>Completion or Recompletion Report and Log form.) |
| We wish to retain this wellbore while we continue the This evaluation should be completed within the next  | et 18-24 months.                 | A the Walten Billion, 1 and 1 and 1   |
| TAA  | 12/4/20d                         |   |
| 14. I hereby cerufy that the foregoing as true and correct   | Reesa R. Wilkes                  | - J 1/10/01   |
| Signed Kolen Wilkes  | Title Regulatory Specialist      | Date1/10/01   |
| (This space for Federal or State office use)   | Title Settlem Frankrikary        | Date 2/12/2001  |
| Conditions of approval if any  |                                  | ,   |
| BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE  | E ROOM, FIELD                    | inited States any false, fictitious or fraudulent stateme   |
| Title 18 U.S.C. Section 1001, makes it a crime for any person knowing or representations as to any matter within its jurisdiction.   |                                  | The States and States   |
| 0 /  | *See Instruction on Reverse Side |   |