

CC-1-Hobbs

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC 031695B
2. Name of Operator Conoco Inc	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX 79705-4500 (915) 686-5580	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage Sec., T. R. M. or Survey Description) 660' FSL & 1980' FWL, Sec. 33, T20S, R38E, N	8. Well Name and No. Warren Unit B/T WF #93
	9. API Well No. 30-025-27584
	10. Field and Pool, or Exploratory Area Warren Blinebry Tubb
	11. County or Parish, State Lea, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input checked="" type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Renew TA Status</u>	<input type="checkbox"/> 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.)\*

Conoco requests renewal approval of Temporary Abandonment status for the above referenced well. A valid MIT was run on 10/23/97 and should be on file with your office.

We wish to retain this wellbore while we continue to evaluate for possible remedial work on this well. This evaluation should be completed within the next 12-18 months.

TA Approved For 12 month Period  
Ending 10/23/2001RECEIVED  
OCT 13 P 3:18  
BUREAU OF LAND MANAGEMENT

14. I hereby certify that the foregoing is true and correct	Signed <u>Reesa R. Wilkes</u>	Title <u>Sr. Staff Regulatory Assistant</u>	Date <u>10/9/00</u>
(This space for Federal or State office use)			
Approved by <u>(Signature)</u>	Title <u>Patrolman</u>	Date <u>10/26/2000</u>	
Conditions of approval if any:			

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

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.

GWW

\*See Instruction on Reverse Side