Form 3160-5 (November 1983) 'Formerly 9-331)		HEUNTER	SUBMIT IN TRIPI	LICATE.	Budget Bureau No. 1004-0135 Expires August 31, 1985 LEASE DESIGNATION AND SERIAL NO.
SUI (Do not use th	BUREAU OF LAND M NDRY NOTICES AND F is form for proposals to drill or to a	REPORTS	ON WELLS 88240)	LL - 03/670(B) IF INDIAN, ALLOTTEE OR TRIBE NAME
ī.	Use "APPLICATION FOR PERM	IT—" for such p	proposeis.)		UNIT AGEREMENT NAME
WELL GAS WELL	OTES				PARM OR LEASE NAME
2. NAME OF OPERATOR CONOCO INC.					SEMU Abo
P. O. Box 460, Hobbs, N.M. 88240					WBLL NO. /2/
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Un: + N					AST SKA995 Abo SEC., T., E., M., OR ELK. AND SUBVEY OF ALMA
660'E	SL & 2310 FWL			5	ec. 18-205-38E
14. PERNIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 30-025-29089					Lea NM
16.	Check Appropriate Box	To Indicate N	Nature of Notice, Repo	ort, or Othe	
	NOTICE OF INTENTION TO:		i	•	EBFORT OF:
TEST WATER SHUT- FRACTURE TREAT SHOOT OR ACIDIZE	PULL OR ALTER CAS MULTIPLE COMPLET ABANDON®		WATER SHUT-OFF FRACTURE TREATME: SHOOTING OR ACIDIZ	11	REPAIRING WELL ALTERING CASING ABANDONMENT®
REPAIR WELL	CHANGE PLANS		(Other)		
(Other)			Completion or	Recompletion	multiple completion on Well n Report and Log form.)
17. DESCRIBE PROFESED proposed work. nent to this work.	If well is directionally drilled, give	tate all pertines subsurface loca	it details, and give pertine tions and measured and tru	nt d ates, in cl pe verti cal de	uding estimated date of starting any option for all markers and sones perti-
D POOH W/ 3 lan tro Zones (d) 4) Set CI	on 1-13-86, Kill will prod. string an accer survey, Resul- sehind the pipe behind the pipe BP @ 7020' and s I 18 sxs class "H" b test csg to 600 p wn on 1-31-86.	d swall ts indica set cm	test Abo ated Communi tretainer & a	6950	between Abo & Dring
Press. Press.	wn on 1-31-86.	31 tol	DMIN., NELL C	ЭK.,	Fire of the
	·				
SICNED	the foregoing is true and correct	TITLE	Administrative Supervisor		DATE 4-1-86
(This space for Fed	leral or State office use)				
APPROVED DI	. Sgd. Charles S. Dallian	TITLE			DATE 4.3.86
CONDITIONS OF A	PPROVALIGHT MAY:				
Subject	to Completions	e Instructions	on Reverse Side		
Tike App	6 1001, makes it a crime for ar se, fictitious or fraudulent state			make to any aatter within	department or agency of the nits jurisdiction.

BLM-Carlsbad (6) ARCO(2) AMOCO(2) Chevron () File