	F			
BUREAU OF LAND MANAGEMENT 1980 Hobb Example Description BUNDRY NOTICES AND REPORTS ON WELLS Case Description Stagenton 1.008368 Do not use this form for proposals to dail or to deepen or reentry to a different reservor. Use "APPLICATION FOR PERMIT for such proposals I funda Addres or Table Name SUMDRY NOTICES AND REPORTS ON WELLS I funda Addres or Table Name SUBMIT IN TRIPLICATE I funda Addres or Table Name Well I cose INJECTION I cose INJECTION I funda Addres or Table Name CONDOC (NC I funda TX 72705-4500, 95 0865-5424 or so co44cos I funda Addres or Table Name I cose I funda TX 72705-4500, 95 0865-5424 or so co44cos I funda TX 72705-4500, 95 0865-5424 or so co44cos I cose I funda TX 72705-4500, 95 0865-5424 or so co44cos I funda TX 72705-4500, 95 0865-5424 or so co44cos I cose I cose I funda TX 72705-4500, 95 0865-5424 or so co44cos I funda TX 72705-4500, 95 0865-5424 or so co44cos I cose I cose I funda TX 72705-4500, 95 0865-5424 or so co44cos I funda TX 72705-4500, 95 0865-5424 or so co44cos I cose I cose I funda TX 72705-4500, 95 0865-5424 or so co44cos I funda TX 72705-4500, 95 005 3304 I cose I cose I cose I funda TX 72705-4500, 95 005 100 TX 100 Fabre I funda TX 72705-4500, 95 005 005 0000 TX 100 Fabre I cost	Form 3160-5 (lune 1990)	UNITED STATES	N.M. Oil CO.	FORM APPROVED Burdeet Burgeau No. 1004-0135
Hobb NM 58241 COSKS COSKS Do not use this form for proposals to did in of b despen or reently to different reservor. If Indem Alattee or Toke Name Use "APPLICATION FOR PERMIT - for such proposals If Indem Alattee or Toke Name SUBMIT IN TRIPLICATE Y Waren Und Bin/Libb WF Weil Cost Waren Und Bin/Libb WF CONDCOUNC Waren Und Bin/Libb WF CONDCOUNC Waren Und Bin/Libb WF CONDCOUNC Bin/Libb WF CONDCOUNC Cost 2005 CONDCOUNC Cost 2005 Condcons Set 15, 14, 05 Sette Cost Statestord Condcons Set 15, 14, 05 Sette Cost The State County, NM 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Index of Intent Bandonment Natice Index of Intent B				*
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to dill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT - Y for such proposals Type of Well Concerning Control or Submittin TRIPLICATE Type of Well Concerning Control on the Nume Object of Concerning C				5. Lease Designation and Senal No.
Do hol use this form for proposals to drill or to deepen or reentry to a different reservoir. Use, "APPLICATION FOR PERMIT" for such proposals				· · · · · · · · · · · · · · · · · · ·
Use "APPLICATION FOR PERMIT" for such proposals SUBMIT IN TRIPLICATE Yes "I Unit of CA. Agreement Despection Yes Water Yes Yes				6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE 7 If Lint or CA, Agreement Despration Yee of Well Investory Investory Warren Unit Blin/tudo WF Convertion Warren Unit Blin/tudo WF Warren Unit Blin/tudo WF CONOCO, INC. 3. API Well No. 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGU 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 96 604-638 TO FIGURATION 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 509-5424 or 90 604-638 TO FIGURATION 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 500-570 TEL Convertion To Pacific Tele To FIGURATION 10 Desta Dr., Suite XOM, Mand, TX 79705-4500 96 500 CO TELE Convertion Tele Convertion Tele 2 Descrite Proposed or Completed Operations (Colarly state all partnere destate, and partnere des		· · ·	rent reservoir.	:
Type of Wall INJECTION S.V. Wall will Once" Wall will S.V. Name of Coentor Wall #206 S.V. Wall #206 CONOCO, INC. S.A.FIVIEI No. S.V. S.V. Address and Telephrine No S.V. S.V. S.V. 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 684-538 Sol 2025 3384 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 684-538 Sol 2025 3384 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 684-538 Sol 2025 3384 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 684-538 Sol 2025 3384 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 684-538 Sol 2025 3384 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 604-538 Sol 2025 3384 10 Desta Dr., Suite COW, Midland, TX 797C5-4500, 956 666-5424 or set 604-538 Sol 2025 3384 2000 Dr. Suite Cow, Midland, TX 797C5-4500, 956 666-5424 or set 604-538 Not Field Midland Mid				7. If Unit or CA, Agreement Designation
X weil Other Numer Clock Warren Und Blinkubb WF Name of Oceration Warren Und Blinkubb WF Warren Und Blinkubb WF CONOCO_INC 3 ARIWeit No 10 Decidor of Weil (Pocings Sec), T, R., M. or Survey Decomption) Surface: 30 Decidor of Weil (Pocings Sec), T, R., M. or Survey Decomption) Surface: Surface: Sub COX, M. Midland, TX 70765-4500, 96 696-5424 or		SUBMIT IN TRIPLICATE		-
Well Other Barner OCentral 8 Varren Und BinAubb WF Verare Und BinAubb WF Verare Und BinAubb WF CONOCO, INC. 8 APT Well No. Address and Telephone No. 96 694 638 10 Dest DA, Suite XOW, Midland, TX.79705-6500, 95 686 5424 or 96 694 638 Uccation of Well (Footage, Sec. 1, R. M. or Survey Description) 90 (2005 3394) Surface 200 (PL & 2005 R). & 2030 FEL Location of Well (Footage, Sec. 1, R. M. or Survey Description) 11 County or Parish, State Location Sec. 34, T305, R38E C TD. Same Lee County, NM 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandoment Subsequent Report Plagging Back Subsequent Report Description State and performed datas, and gree performed datas, and gree performed datas, and gree performed datas, and gree performed datas, and press and zones performed datas, and gree performed data		IECTION		
CONOCO, INC 9. APPWer No Address and Telephone No 30 C25 3394 10 Desta Dr., Suite BOW, Midland, TX 79705-4500, 95 696-5424 or 96 694-638 Surface: 2000 FNL & 2630 FEL Location of Weil Roadse, Sec. T, M. or Sumy Description 31 Contry or Parish, State Do Barne 11 Country or Parish, State Location 2000 FNL & 2630 FEL Location 11 Country or Parish, State Location 2000 FNL & 2630 FEL Location 11 Country or Parish, State Location 2000 FNL & 2630 FEL Location 11 Country or Parish, State Location 2000 FNL & 2630 FEL Location 12 Output Description 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Image: Report Image: Report Image: Report Image: Repor	Well Well Other		· · · · · · · · · · · · · · · · · · ·	
Address and Telephone No 10 Desta Dr., Suite RDW, Midland, TX 75705-4500, 95 686-5424 or 96 684-638 10 Desta Dr., Suite RDW, Midland, TX 75705-4500, 95 686-5424 or 96 684-638 10 Desta Dr., Suite ROW, Midland, TX 75705-4500, 95 686-5424 or 96 684-638 11 Country of Parish, State Location Sec 34, T205, R38E 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 3 Under direct and the second seco	. Name of Operator			
10 Desta Dr., Suite KOW, Midland, TX 79705-4500, 95 686-5424 or ext 684438 30 025 3394 10 Desta Dr., Suite KOW, Midland, TX 79705-4500, 95 686-5424 or ext 684438 10 FRId 11 Coation of Well (Footlage Sec. 1, R, M, or Survey Description) 11 Country or Parsh, State Surface: 250 0FRL & 2500 FEL 10 Same 11 Country or Parsh, State 10 Desta Dr., State 11 Country or Parsh, State 10 Desta Dr., State 11 Country or Parsh, State 10 Desta Dr., State 11 Country or Parsh, State 10 Desta Dr., State 11 Country or Parsh, State 10 Desta Dr., State 11 Country or Parsh, State 10 Desta Dr., State Dr., State 11 Country or Parsh, State 10 Desta Dr., State				9. API Well No.
Location of Well (Poldage Sec, T, R, M, or Survey Description) Warren Binebry/Lubb Surface: 2500 FNL & 2630 FEL 11 Country or Parsh, State Location: Sec 34, T305, R36E 11 Country or Parsh, State Lea County, NM Lea County, NM 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandomment Subsequent Report Preading Repair Subsequent Report Completed Operations (Dearly state all pertinent defaits, and pre-perinent dates, including edimated date of stating any proposed work. If well is directionally drilled give subsurface locations and measured and true vertical degris for all markers and zones pertinent to this work. ¹ 3 Describe Proposed or Completed Operations (Clearly state all pertinent defaits, and pre-perinent dates, including edimated date of stating any proposed work. If well is directionally drilled give subsurface locations and measured and true vertical degris for all markers and zones pertinent to this work. ¹ 8-19-97: Ran 6750' of 5 V/2', IS.5#, K-55, LT & C cassing, cemented with lead slurry of 685 sx CI C + 16% get P 3/0% CD-32 + 3/0% SMS, tailed with 755 sx CI + 11% FL-62 + 1% BA-58 CD + 3/0% CD-32 + 3/0% SMS + 3% satt. Circulated II0 sx to pit. WOC. Rig released. If I I I I I I I I I I I I I I I I I I				
Location: Sec 34, 7205, R38E Lea County, NM 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abadoment Subsequent Report Pugging Bock Final Abandoment Notice Attemp Casing Concersion to Injection Oversion to Injection Subsequent Report Casing Repair Plugging Bock Oversion to Injection Concersion to Injection Casing Repair Obschole Proposed or Completed Operations (Chearly state all partment details, and give pertinent to this work." 3 Describe Proposed or Completed Operations (Chearly state all partment details, and give pertinent det			4-6381	
Location: Sec 34, T205, R38E Lea County, NM 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abardonment Charge of Plans Subsequent Report Abardonment Non-Rodine Fracturing Cherck Appropriate and the pugging Back Non-Rodine Fracturing New Construction Subsequent Report Casing Repair Water Shut-Off Cherck Dorpolect or Completed Operations (Dearty state all pertinent details, and give pertinent details, and give pertinent details, and give pertinent details, and give pertinent details, and provide and true vertical depths for all markers and zones pertinent to this work." 3 Describe Proposed or Completed Operations (Dearty state all pertinent details, and give pertiment details, and give pertinent details, and give pertinent detail				•
2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA YPE OF SUBMISSION TYPE OF ACTION Notice of Intent Notice of Intent Subsequent Report Casing Repair Casing Repair Conversion to floation Conversion Conversion to floation Conversion Conversio	Location: Sec 34, T20S, R38		and country of Farish, state	
TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans X Subsequent Report Plugging Back Non-Routine Fracturing X Subsequent Report Casing Repair Water Shut-Off X Subsequent Report Casing Repair Water Shut-Off X Subsequent Report Casing Repair Operations (Dearly state all petritient details, and give pertinent details, and give petritient details, and gives give	TD: Same	-		Lea County, NM
TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Subsequent Report Plugging Back Non-Routine Fracturing Subsequent Report Casing Repair Water Shut-Off Final Abandonment Notice Altering Casing Conversion to Injection Subsequent Report Casing Repair Dispose Water Shut-Off Casing Repair Conversion to Injection Conversion to Injection Subsequent Report Casing Repair Conversion to Injection Completed Operations (Clearly state all pertitient details, and give pertitient details, including estimated date of stating 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 if Ceretor and zones pertinent to this work if 8-19-97: Ran 6750' of 5 l/2", I5.5#, K-55, LT & C casing, cernented with lead slurry of 665 sx Cl C + K6% gel + 2% Salt + 3/10% CD-32 + 3/10% SMS, tailed with 755 sx Cl + II% FL-62 + I% BA-58 cover set all states of the state of state of state of state of the state offic		E BOX(s) TO INDICATE NATURE OF	NOTICE, REPORT, OR O	THER DATA
Notice of Intent Abandonment Change of Plans Notice of Intent Recompletion New Constituction Notice of Intent Recompletion New Constituction Notice of Intent Plugging Back Non-Routine Fracturing Subsequent Report Casing Repair Water Shut-Off Casing Repair Conversion to Injection Deposed Vater Shut-Off Casing Repair Conversion to Injection Deposed Vater Shut-Off Conversion to Injection Conversion to Injection Deposed Vater Shut-Off Conversion to Injection Conversion to Injection Matering Casing Conversion to Injection Conversion to Injection Matering Casing are proposed work if well is Subsequent Report Conversion to Injection Matering Casing are proposed work if well is Subsequent Report Conversion to Injection Matering Casing are proposed work if well is Subsequent Report Conversion to Injection Matering Casing are proposed work if well is Subsequent Report Conversion to Injection Matering Casing are proposed work if well is Subsequent Report Conversion to Injection Subsequent Report Subsequent Report Conversinton to Inject	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
Subsequent Report Recompletion				Change of Plans
Gasing Repair Gasing				
Inal Abandonment Notice Image: Conversion of Dispose Water Image: Conversion of Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of stating 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. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depth store all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depth store all markers and zones pertinent to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depth store at a directional store at a directio	X Subsequent Report			Non-Routine Fracturing
Cher: Long string & release rg Dispose Water Meter Report reads of maßipic completion on Water Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of stating 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.') 8-I9-97: Ran 6750' of 5 1/2", I5.5#, K-55, LT & C casing, cernented with lead slurry of 665 sx Cl C + 16% gel + 2% Salt + 3/10% CD-32 + 3/10% SMS, tailed with 755 sx Cl + I.1% FL-62 + 1% BA-58 + 3/10% CD-32 + 2/10% SMS + 3% salt. Circulated II0 sx to pit. WOC. Rig released. Accepted by Ann E. Richlie Title Ann E. Richlie Title Approved by Title Date Date Date			Casing Repair	Water Shut-Off
Approved by Mate E Ritchie Approved by The	Final Abandonment N	lotice	Altering Casing	Conversion to Injection
3 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. It well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work." 8-I9-97: Ran 6750' of 5 U/2", I5.5#, K-55, LT & C casing, cemented with lead slurry of 665 sx Cl C + 16% gel + 2% Salt + 3/10% CD-32 + 3/10% SMS, tailed with 755 sx Cl + 1.1% FL-62 + 1% BA-58 cm + 3/10% CD-32 + 2/10% SMS + 3% salt. Circulated II0 sx to pit. WOC. Rig released. Image: CCEPTED FOR RECORD for Size SGD.) Image: SGD.) A Thereby certify that the forepoing it may be performed to the reduction of the ording it may be performed. Ann E. Ritchie Signed Trie Ann E. Ritchie The Signed for Federal or State office use) The State office use)		XO	ther: Long string & release rig	·
directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* 8-I9-97: Ran 6750' of 5 1/2", I5.5#, K-55, LT & C casing, cemented with lead slurry of 665 sx Cl C + 16% gel + 2% Salt + 3/10% CD-32 + 3/10% SMS, tailed with 755 sx Cl + 1.1% FL-62 + 1% BA-58 gel + 3/10% CD-32 + 2/10% SMS + 3% salt. Circulated II0 sx to pit. WOC. Rig released. Image: Comparison of the symptotic				
8-I9-97: Ran 6750' of 5 1/2", I5.5#, K-55, LT & C casing, cemented with lead slurry of 665 sx Cl C + 16% gel + 2% Salt + 3/10% CD-32 + 3/10% SMS, tailed with 755 sx Cl + I.I% FL-62 + 1% BA-58 + 3/10% CD-32 + 2/10% SMS + 3% salt. Circulated II0 sx to pit. WOC. Rig released. ACCEPTED FOR RECORD BLM 4 Thereby certify that the torogoing incodent for the torogoing incodent for Federal or State office use) Approved by Tite Date	3. Describe Proposed or Completed Oper	rations (Clearly state all pertinent details, and give pertin	nent dates, including estimated date of	starting any proposed work. If well is
A Thereby certify that the foregoing is true strike office use) A. Thereby certify that the foregoing is true strike office use) Ann E. Ritchie Title Ann E. Ritchie REGULATORY AGENT Date	gel + 2% Salt + + 3/l0% CD-32 ·	3/0% CD-32 + 3/0% SMS, tailed with + 2/0% SMS + 3% salt. Circulated II0 ACCE	755 sx CI + I.1% FL-62 + 1% sx to pit. WOC. PTED FOR REC ORD	BA-58 BUREAU A
Signed Multiplication Ann E. Ritchie Title REGULATORY AGENT Date (This space for Federal or State office use) Title Note office use	4. Thereby certify that the foregoing is tru		SEP 0 5 1997	S A IO: I
Signed Image: Contract of the space for Federal or State office use) Title REGULATORY AGENT Date Approved by Title Date	MAT	AT H		• *
Approved by Title Date	Signed Mul (Yu		ENT	Date 9-4-97
	(This space for Federal or State office u	use)		
	Approved by	Title		Date
			y separation of agency of the United S	
the 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 atements or representations as to any matter within its jurisdiction.		*See Instruction on	Reverse Side	
	ST: BLM(5) NMOCD(1)			

---.<u>-</u>

.

Received Hothers

) 7