		N.M. Oil Cons. 🗇	Avie -
Form 3160-5 (June 1990)	UNITED STA DEPARTMENT OF THE		FORM APPROVED Budget Bureau No. 1004-0135
	BUREAU OF LAND MAI	NAGEMENT TODOS, MIN COR	Expires: March 31, 1993 5. Lease Designation and Serial No.
			LC 063458
SUNDRY NOTICES AND REPORTS ON WELLS			6. If Indian, Allottee or Tribe Name
Do not use this form for proposa Use "APPLICATION I	ls to drill or to deepen or reen FOR PERMIT* for such propo	-	
	SUBMIT IN TRIPLIC	ATE	7. If Unit of CA, Agreement Designation
1. Type of Well X. Oil Gas IN	JECTION		
Well Well Other 2 Name of Operator			8 VIVAINE OF TEASE & WEIT
	Well #146		
CONOCO, INC. 3: Address and Telephone No.	;		
10 Desta Dr., Suite I00W, Midlar	30 025 34362 10. Field and Pool, or Exploratory Area		
4 Location of Well (Footage, Sec., T., R., I	Warren Drinkard East		
Surface: 660' FSL & 860' FEL TD: Sec 26, T20S, R38E			11. County or Parish, State
			Lea, NM
12 CHECK APPROPRIAT	E BOX(s) TO INDICATE N	ATURE OF NOTICE, REPORT, C	OR OTHER DATA
TYPE OF SUBMISSIC	SUBMISSION TYPE OF ACTION		
Notice of Intent		Abandonment	Change of Plans
		Recompletion	New Construction
X Subsequent Report		Plugging Back	Non-Routine Fracturing
		Casing Repair	Water Shut-Off
Final Abandonme	otice	Altering Casing	Conversion to Injection
		X TD, cement production casing	Dispose Wate: Dispose Wate: Note: Report results of multiple completion on Well
			Completion or Recompletion Report and Log form.)
+ 3/10 CD-32, 3	I/2", I7#, K-55 casing, ceme /I0% SM, tailed with 325 sx 5 SM, circulated I28 sx to su	ACCEPTED FOR SCI URACEPTED FOR SCI URACEPTED FOR SCI ORIG. SGD.) DA	+ 3/10% CD-32 + 20-32 VID Romasson
14 Thereby certify that the foregoing is pu	e and porgect	<u>51.M</u>	
Signed Mult View (This space for Federal or State office L			Date 7-8-98
Approved by Conditions of approval if any	Title		Date
Title 18 U.S.C. Section 1001, makes it a cristatements or representations as to any ma	atter within its jurisdiction.	to make to any department or agency of the Unite	d States any false fictitious or fraudulent
DIST. BLM(5) NMOCD(1)	*S ee In	struction on Reverse Side	