

OCK - Hobbs

Form 1100-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.  
LC 031695A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
Semu #134

9. API Well No.  
30-025-34382

10. Field and Pool, or Exploratory Area  
South Cass Strawn

11. County or Parish, State  
Lea Co., NM

**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  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
CONOCO INC.

3. Address and Telephone No.  
10 DESTA DR. STE. 430E, MIDLAND, TX. 79705-4500 (915) 686- 5515

4. Location of Well (Footage, Sec., T. R. M. or Survey Description)  
Section 30, T-20-S, R-38-E  
1650' FSL + 450' FWL

**CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Repon	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input checked="" type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Extension of time</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracuring
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Reponresultsof multiplecompletionWdl Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state ail 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.)\*

This is a request to extend the approved APD for another 12 month period.

Approved For 12 Month Period  
Ending 4/17/2000

14. I hereby certify that the foregoing is true and correct

Signed Jo Ann Johnson Title Sr. Property Analyst Date 4/5/99

(This space for Fe (Orig. Use) JOE G. LARA Title Petroleum Engineer Date 4/29/99

Approved by \_\_\_\_\_ Conditions of approval if any: \_\_\_\_\_

BLM(6), SHEAR, PONCA, COST ASST, FILE ROOM

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.

\*See Instruction on Reverse Side

RECEIVED  
APR 07 99  
ELM  
ROSWELL, NM