

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240
FORM APPROVED
Bureau No. 1004-0135
Expires: March 31, 1993
Designation and Serial No.
LC 031696A

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	6. If Indian, Allottee or Tribe Name
2. Name of Operator CONOCO INC.	7. If Unit or CA, Agreement Designation
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5424	8. Well Name and No. SEMU #136
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) Section 25, T-20-S, R-37-E, L 1980' FSL & 1090' FWL	9. API Well No. 30-025-34667
	10. Field Name or Tubing Designation North Hardy Tubing Designation 96356
	11. County or Parish, State Lea Co., NM

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 checked="" type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracrunng
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Reponresultsof multiplecompletionWell 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, Inc proposes to recomplete this well to the tubb using the following procedure.

1. MIRU and pull production equipment
2. RU e-line and set RBP at 7100' to isolate the Abo
3. Perforate the Tubb from 6488-6568' @ 1jspf
4. Fracture stimulate the Tubb interval
5. RIH with 2-3/8" production equipment. RDMO

After production testing the Tubb zone Conoco plans to apply for a C-107A Order to Downhole Commingle the Abo & Tubb

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

Kay Maddox

Signed

Title

-Regulatory Agent

Date

November 2, 1999

(This space for Federal or State office use)

Approved by

(ORIG. SGD.) ALEXIS C. SWOBODA

Title

PETROLEUM ENGINEER

Date

NOV 10 1999

Conditions of approval if any:

BLM(6), NMOC(1), 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

District IV
PO Box 2088, Santa Fe. NM 87504-2088

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Revised February 21, 1994
instructions on back
Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-34667		2 Pool Code 56650 96356	3 Pool Name South Slope Abo (Oil) Hardy Tubb Drinker
4 Property Code	5 Property Name SEMU		6 Well Number #136
7 OGRID No. 005073	8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500		9 Elevation 3510'

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	25	20S	37E		1980'	South	1090'	West	Lea

		0900	1000
11 Bottom Hole Location If Different From Surface			
Base	Latitude		

11 Bottom Hole Location If Different From Surface									
LL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
12 Dedicated Acres 40	13 Joint or Infill		14 Consolidation Code		15 Order No. 151-436E-0				

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16

1090'

1980'

17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Signature Kay Maddox

Signature Kay Maddox

Printed Name _____
Regulatory Agent _____

Title _____
November 1, 1999

Date _____

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number



100-441111-100
100-441111-100
100-441111-100