

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
1625 N. French Dr.  
Hobbs, NM 88240

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

**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		5. Lease Designation and Serial No. <b>LC 031696A</b>
2. Name of Operator <b>CONOCO INC.</b>		6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5580/684-6381</b>		7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) <b>Sec 25, T20S, R37E, 1980' FNL &amp; 1830' FWL</b>		8. Well Name and No. <b>SEMU, Well #146</b>
		9. API Well No. <b>30 025 34977</b>
		10. Field and Pool, or Exploratory Area <b>South Skaggs Abo</b>
		11. County or Parish, State <b>Lea County, NM</b>

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

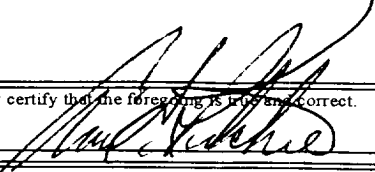
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Repon	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/>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

Note: Report results of multiple completion on Well 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.)\*

10/16/2000: Reached TD of 7700'. Condition and circulate hole for logs.  
10/17/2000: Running logs.  
10/18/2000: Ran sidewall cores. Began running 5 1/2", 17 #, casing to TD of 7700'.  
10/19/2000: Finished running 5 1/2" casing. Rigged up BJ. Cemented first stage plug down at 10:00AM. Circulated between stages and waited on cement. Cemented 2nd Stage, Plug down at 16:00 with 1250 psi. Circulated 78 bbls. of cement to the pit, rig down BJ. Tested to 2000 psi. Rig was released.

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

Signed  Title **Ann E. Ritchie  
Regulatory Agent** Date **12/13/00**

(This space for Federal or State office use)

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

BLM(6)

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.