

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. 10 04-0135
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. NM 0557686
2. Name of Operator CONOCO INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5424	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T.R., M. or Survey Description) Section 23, T-20-S, R-37-E, C 330 FNL & 2310 FWL	8. Well Name and No. SEMU # 162
	9. API Well No. 30-025-35774
	10. Field and Pool, or Exploratory Area Cass Penn
	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"/> Change of Plans
<input type="checkbox"/> Subsequent Reopen	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input checked="" type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Reopeners use 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.) *

This is a recent well, rig released 2/24/2002. Attempted completion in the Strawn - perforated (7724-7916'), it was not productive. Conoco proposes to set a CIBP @ 7700' w/ 35' cmt. and come uphole and perforate the Drinkard (6620-6848') -test this zone for thirty days, set a RBP @ 6595', come up and perforate the Tubb (6430-6480'). Conoco proposes to eventually downhole commingle the production in this well.

14. I hereby certify that the foregoing is true and correct		Kay Maddox
Signed <i>Kay Maddox</i>	Title - Regulatory Agent (915) 686-5798	Date May 6, 2002
(This space for Federal or State office use)		
Approved by ORIG. SGD) DAVID R. GLASS	Title	Date
Conditions of approval if any: MAY 9 2002		
BLM(6), NMOCD(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

Kz

RECEIVED
MAR 3 2006
2006 MAR - 3 21 94 06
MAR 3 2006

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd. Aztec, NM 87410

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

State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-102

Revised February 21, 1994

instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-35774	2 Pool Code 63840	3 Pool Name Weir Drinkard
4 Property Code	5 Property Name SEMU	6 Well Number #162
7 OGRID No. 005073	8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500	9 Elevation 3535'

10 Surface Location

UL or ldn.	Section	Town ship	Range	Lot ldn	Feet from the	North/South line	Feet from the	East/West line	County
C	23	20S	37E		330	North	2310	West	Lea

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot ldn	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.
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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	2310	330

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

Printed Name
Regulatory Agent

Title
May 6, 2002

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