M.M. OIL CONS. COMMISSION P.O. BOX 1980 HOBBS, NEW MEXICO 88240

Form 3160-5 (June 1990)		STATES F THE INTERIOR D MANAGEMENT D REPORTS ON WELLS	FORM APPROVED Budget Bureau No. 1004-0135	
	BUREAU OF LAN		Expires: March 31, 1993 5. Lease Designation and Serial No.	
	SUNDRY NOTICES AN		NM Ø62664	
Do not use this form for proposals to drill or to deepen or reentry to a different reservo Use "APPLICATION FOR PERMIT—" for such proposals			6. If Indian, Allottee or Tribe Name	
	SUBMIT IN	TRIPLICATE	7. If Unit or CA, Agreement Designation	
Type of We	ell Gas Wall Other		S. Well Name and No.	
2 Name of Operator CONOCO INC. 3 Address and Telephone No. 10 Desta Drive STE 100W, Midland, TX 79705 (915) 686-6551			LOCKHART A-30 # 1	
			9. API Well No.	
			30-025-04832 10. Field and Pool, or Exploratory Area	
4 Location of	Well (Footage, Sec., T., R., M., or Survey Descrip	(COS)	ELMONT YATES 7 RVRS ON (PRO	
1980 FN SEC. 30.	IL, 660 FEL T-21S, R-36E, UNIT LTR 'H	! *	11. County or Parish, State	
		O INDICATE NATURE OF NOTICE, REP	LEA. NM	
TYPE OF SUBMISSION		TYPE OF ACTIO		
		THE STATE OF THE S		
	Notice of Intere	Recognistion	Change of Plans New Construction	
	XX Subsequent Report	Plugging Back	Non-Routine Fracturing	
		Craing Repair	Water Shut-Off	
	Final Abandonment Notice	Attering Casing Other	Conversion to Injection Dispose Water	
			(Note: Report results of multiple completion on Weil Completion or Recompletion Report and Log form.)	
13. Describe Pro	oposed or Completed Operations (Clearly state all perturbantage locations and measured and true vertical de-	ment details, and give pertunent dense, including estimated dest of star oths for all markers and zones pertunent to this work.)*	ting any proposed work. If well is directionally drilled.	
9-8-94 M		BS & SOPMA. RIH W/ ON/OFF TOOL O	N TEG & TAGGED UP @ SUB TO CLOSE WELL IN.	
		CARLSBAD, NEW MEXIC	RECEIVED OCT 5 10 56 AM '94 CARLL AREA books and age area books area	
14. I hereby cer	The contract of the contract o	STAFF REGULATORY ASSISTAN	T 10-02-94	
	for Federal or State office use)			
Approved b Conditions	y	Tide	Date	
Tide 18 1/ 5 C	Service (M) realize at a course for new parties become	and and antifully to make a say describe an account of the fire		

*See instruction on Reverse Side