Form 3160-5 (June 1990)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT	<b>N.M. Oil Cons</b> P.O. Box 1980 Hobbs, NM 8824	Budget Bureau No. 1004-0135 Expires March 31, 1993 Lease Designation and Serial No
SUN	IDRY NOTICES AND REPORTS ON WE	LLS	LC 03I740B 6. If Indian, Allottee or Tribe Name
	o drill or to deepen or reentry to a different PERMIT for such proposals	t reservoir.	
	SUBMIT IN TRIPLICATE		7. If Unit of CA, Agreement Designation
1. Type of Well		<u>-</u>	
X Oit Gas INJECTION Weil Weil Other			8. V
2. Name of Operator			Meyer B 4 Well #32
CONOCO, INC. 3. Address and Telephone No			9. /
10 Desta Dr., Suite I00W, Midland, Texas 79705-4500,9I5 686-5424 915 684-6381			30 0025 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R , M., or	Survey Description)		Drinkard
Surface: 990 FSL & 660' FEL TD: Sec 4, T2IS, R36E			11. County or Parish, State
			Lea, NM
12 CHECK APPROPRIATE B	OX(s) TO INDICATE NATURE OF N	OTICE, REPORT, OR (	DTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION	
Notice of Intent	Aban	donment	Change of Plans
		mpletion	New Construction
X Subsequent Report		ing Back ng Repair	Water Shut-Off
Final Abandonment Notice		ng Casing	Conversion to Injection
	X Spud 8	set surface casing	Dispose Water
			(Note Report results of multiple completion on Wet Completion or Recompletion Report and Log form.)
<b>i-24-9</b> 8: Move in and spud i-26-98: Ran <b>i244'</b> of <b>8 5/8"</b> + 2% CaCl2 + i/4#/ Circulated 30 sx to	, <b>23#</b> , M-50, ST & C casing, cemente /sk cello-flake, tailed with <b>200 sx</b> Cl C	d with lead slurry - <b>350</b> + 2% CaCl2. Tested to	sx, 35:65:6, 1000 psi.
	1 ma		FEB 1 7 1998
14. I hereby certify that the foregoing a true and Signed (This space for Federal or State office use)	Ann E. Ritchie Title REGULATORY AGENT	r	Date 2-9-98
Approved by Conditions of approval, if any:	Trtle		Date
Title 18 U.S.C. Section 1001, makes it a crime for statements or representations as to any matter v	or any person knowingly and willfully to make to any dep within its jurisdiction.	partment or agency of the United St	ates any false, fictitious or fraudulent
	*See Instruction on Re	verse Side	
DIST: BLM(5) NMOCD(1)			