Form 3160-5	UNI	TED STATES	N.M. Oil Cons. D	
(June 1990)	DEPARTMENT	MENT OF THE INTERIOR P.O. BOX 1980		Budget Bureau No. 1004-0135
				Expires: March 31, 1993 5. Lease Designation and Serial No.
Hobbs, NM 88241				NM 90162
SUNDRY NOTICES AND REPORTS ON WELLS				6. If Indian, Allottee or Tribe Name
Do not use this form for Use "APPLICA	proposals to drill or to deepen TION FOR PERMIT for su	n or reentry to a c ich proposals	different reservoir.	
	SUBMIT IN 1			7. It Unit or CA, Agreement Designation CA NM 90999
1. Type of Well				
Oil X Gas INJECTION Well Well Other				
2. Name of Operator				Lockhart "B" Com Well #13
CONOCO, INC. 3. Address and Telephone No.				
5. Address and Telephone No.	30 025 34351			
10 Desta Dr., Suite 100W 4. Location of Well (Footage, Sec	10. Field and Pool, or Exploratory Area			
				Eurnont Yates/7 Rvrs/Queen/Pro Gas
Sunface: 990' FNL & 1650' FWL, Unit C TD: Sec I3, T2IS, R36E				11. County or Parish, State
				Lea, NM
12 CHECK APPROP	RIATE BOX(s) TO INDIC			
			TYPE OF ACTION	
Notice of Inte	nt		Abandonment	Change of Plans
			Recompletion	New Construction
X Subsequent Report			Plugging Back	Non-Routine Fracturing
C Provense a			Casing Repair	Water Shut-Off
Final Abandonment Notice			Attering Casing	Conversion to Injection
		×	Surface casing	Dispose Water (Note: Report results of multiple completion on Well
	ed Operations (Clearly state all pertine		·····	Completion or Recompletion Report and Log form.)
5- <u>18-98:</u> Spudded 5-19-98: Ran 455', + 2/10% S I200# - go	8 <u>5/8", 23#</u> casing, cemer M, tailed with I00 sx CI C -	nted with lead si + 2% CaCl2, 33	lurry - 230 sx Cl C + 4% g sx circulated to surface.	el + 2% CaCl2 Tested to
	11		ACCRPTED FO (ORIG. SGE JUN 2 9 BLM	D.) DAVID R GLASS
14. I hereby certify that the foregoin	is the and correct			
Signed Chick	Tulana m	Ann E. Ritchie REGULATORY AC	SENT	Date 6-19-08
(This space for Federal or State	office use)	REGULATORT AC		Date <u>6-18-98</u>
	,			
Approved by Conditions of approval, if any:	Title			Date
Title 18 U.S.C. Section 1001, makes statements or representations as to	it a crime for any person knowingly an any matter within its jurisdiction.	nd willfully to make to an	y department or agency of the United S	States any false, fictitious or fraudulent
		*See Instruction of	n Reverse Side	
DIST: BLM(5) NMOCD(1)				