

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division
P.O. Box 1980
Hobbs, NM 88241

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 type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>Injection Well</u>	5. Lease Designation and Serial No. LC 030133B
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) 686-5580	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) 1980' FSL & 660' FEL, Sec. 33, T22S, R36E, I	8. Well Name and No. South Eunice Unit #60
	9. API Well No. 30-025-09121
	10. Field and Pool, or Exploratory Area Eunice 7 Rvrs Queen
	11. County or Parish, State Lea, 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"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Casing Integrity Test</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)*

It is proposed to perform a Casing Integrity Test on this well, per the attached recommendation.

When completed, a successful pressure test will be submitted.

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

Signed <u>Reesa R. Wilkes</u>	Title <u>Sr. Staff Regulatory Assistant</u>	Date <u>06/15/99</u>
This space for Federal or State office use		
Approved by <u>(ORIG. SGD.) DAVID R. GLASS</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>JUN 29 1999</u>
Conditions of approval if any:		

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.

CONDITIONS OF APPROVAL

Instruction on Reverse Side

South Eunice Unit #60

30-025-09121

Recommendation for renewal of Temp. Abandonment

This well is currently Temporarily Abandoned. It is recommended that the well be renewed for Temporary Abandonment upon passing the following casing integrity test. Currently we are still evaluating further possible up-hole potential.

1. Circulate Casing with inhibited packer fluid.
2. Pressure test casing to 500# for 30 minutes. Give OCD 24 hrs notice prior to pressure test.