Form 3160-5
(November 1983)
(Formerly 9-331)

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.: LC-069515

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER: Injection

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: CONOCO INC.

8. FARM OR LEASE NAME: North El Mar Unit

3. ADDRESS OF OPERATOR: P. O. Box 460, Hobbs, N.M. 88240

9. WELL NO.: 35

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: Unit N

660' FSL & 1980' FWL

10. FIELD AND POOL, OR WILDCAT: El Mar Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 25-26S-32E

14. PERMIT NO.: 30-025-08274

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH: Lea | 13. STATE: NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) temporary abandon ✓	
(Other)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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.)*

① MIRU. Rel pkr & POOH. Set CIBP @ 4550', & pkr @ 4530'.
② Test CIBP to 1000 psi & csg to 500 psi
③ Circ. w/ 30 bbls pkr fluid. Rig down on 12/6/86

APPROVED FOR 12 MONTH PERIOD
ENDING 3/5/88

18. I hereby certify that the foregoing is true and correct
SIGNED Mike Stanley DF Finley TITLE Administrative Supervisor DATE 3-6-87

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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.

BLM-Carlsbad (6) NMOCD-Hobbs (3) File