

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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 ☒ <u>Injection Shut-in</u>	5. LEASE DESIGNATION AND SERIAL NO. <u>LC-069515</u>
2. NAME OF OPERATOR <u>CONOCO INC.</u>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>P. O. Box 460, Hobbs, N.M. 88240</u>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>Unit J</u>	8. FARM OR LEASE NAME <u>North El Mar Unit</u>
	9. WELL NO. <u>22</u>
	10. FIELD AND POOL, OR WILDCAT <u>El Mar Delaware</u>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 25-26S-32E</u>
14. PERMIT NO. <u>1980' FSL & 1980' FEL</u> <u>30-025-08278</u>	12. COUNTY OR PARISH <u>Lea</u> 13. STATE <u>NM</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) <u>temporary abandon</u>	☒

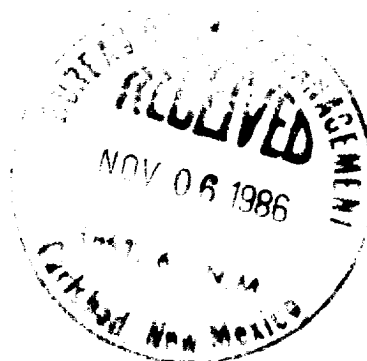
SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(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. POOH w/ injection equip. Run bit & scraper to perfs.
- ② Set CIBP @ 4570'. Test CIBP to 1000 psi. Load & press. test csg to 600 psi for ¹⁵ minutes. If csg doesn't test, a sqz procedure will follow.
- ③ Circ. hole full of 9.0 ppg brine (pkr fluid).
- ④ Rig down.



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

SIGNED Cecil C. [Signature]

TITLE Administrative Supervisor

DATE 11-4-86

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 11-13-86

Subject to
Like Approval
by State

*See Instructions on Reverse Side