

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI
(Other instructions on re-
verse 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

2. NAME OF OPERATOR
CONOCO INC.

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

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

14. PERMIT NO. 1980' FNL & 1980' FWL
30-025-08299

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

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

North El Mar Unit

9. WELL NO.

10

10. FIELD AND POOL, OR WILDCAT

El Mar Delaware

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

SEC. 26-26S-32E

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:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☒

(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 and 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/ tbg & pkr. Run scraper to 4560'.
- ② Set CIBP @ 4480' & pkr @ 4419'. Test CIBP to 1125 psi, held.
- ③ Test csq to 575psi, held. Circ. pkr fluid. POOH w/ pkr. Rig down on 11-19-86.

I hereby certify that the foregoing is true and correct

SIGNED Don Finney DF FINNEY

TITLE Administrative Supervisor

DATE 3-6-87

FOR APPROVAL BY A SUPERVISOR OR STATE OFFICE USE:

APPROVAL OF
SUPERVISOR'S OFFICE, IF ANY:

TITLE

DATE

*See instructions on Reverse Side

False statements made by any person knowingly and willfully to make to any department or agency of the
Bureau of Land Management constitute a crime under the provisions of the Federal Criminal Code.

Bonnie Ruth Fielder

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

RECEIVED
MAR 17 1987
OCD
HOBBS OFFICE