

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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
☐ Oil Well ☐ Gas Well ☒ Other Injection

2. Name of Operator
Conoco, Inc.

3. Address and Telephone No.
10 Desta Dr. Ste 100W, Midland, TX 79705

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter 'E', 1980' FNL & 660' FWL
Sec. 26, T-23S, R-36E

5. Lease Designation and Serial No.
LC 030139B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Langlie Lynn Qn Un#17

9. API Well No.
3002520652

10. Field and Pool, or Exploratory Area
Langlie Mattix 7 Rivers
Queen

11. County or Parish, State
Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- ☒ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Alarming Casing
- ☐ Other _____
- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ 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 plug and abandon the Langlie Lynn Queen Unit No. ¹⁷~~19~~ according to the attached procedure.

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

Signed [Signature] Title Sr. Conservation Coordinator Date 06-17-92

(This space for Federal or State official use)

Approved by [Signature] Title _____ Date 7 8 9 2

Conditions of approval, if any: